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THE UNIVERSITY OF ALBERTA

Project 72: Programming in a Residential
Treatment Facility

by



James Gerard Dukowski, O.M.I.

A Thesis

Submitted to the Faculty of Graduate Studies and
Research in partial fulfillment of the requirements
for the degree

of . . . Master of Education

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Edmonton, Alberta

Fall, 1976

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The undersigned certify that they have read,
and recommend to the Faculty of Graduate Studies and
Research, for acceptance, a thesis entitled
Project 72: Programming in a Residential Treatment..
Facility.....
submitted by James G. Dukowski, O.M.I.....
in partial fulfilment of the requirements for the
degree of Master of Education.....

DEDICATION

To the men and women whose enthusiasm,
patience and generosity have enabled a
vision to become a reality. And to the
people who have allowed the reality to
become a part of their life.

ABSTRACT

This study is a descriptive record of the conception, establishment and operation of a rehabilitative treatment facility for young adults who have manifested behavioral patterns of drug abuse or other forms of social maladjustment. A brief historical review of the origin of Project 72 in reference to other treatment programs, is given. Special attention is focused on the process of program development within the context of the goals and objectives of Project 72. Selected case studies are included and specific issues discussed. This thesis can hopefully serve as a "blueprint" for anyone contemplating or developing programs of rehabilitation and/or prevention. For this reason the emphasis of the study has been placed on theoretical rationale and structures where context has been organized according to goals, objectives and program design so as to facilitate process evaluation.

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CHAPTER I

Introduction and Background

This study is a description of the development of a residential treatment facility for young adults in Edmonton, Alberta. As founder of Project 72, I have incorporated my own personal experiences, perceptions and reflections into the text. For this reason sections are written in the first person. For the convenience of the reader, an index of contents, alphabetical topical index and glossary of terms have been included as appendices.

In order to situate the Project more accurately in its historical context, this first chapter begins with a significant personal experience of the "drug problem" and then reviews the development of the type of therapeutic community to which the Project identifies. Since Project 72 developed in response to my perception of local needs at the time as well as from my experience of living in a residence of the Manhattan Project in Los Angeles, California, these topics are touched upon. Due to the important influence of the structure of the Manhattan Project on the development of the program of Project 72, considerable reference is made to the Manhattan Project throughout the study.

In July 1970, I was confronted by a new social reality. I had spent the previous five years in South America and on returning to this continent I was immediately swept up into the much publicized concern of the day - the "drug problem". a personal experience verified for me the validity of the public concern. While staying with

close friends that summer I had a first hand view of the family and individual turmoil generated by their eldest boy who was using illicit drugs. His record of school attendance and performance had steadily deteriorated as did his relationships within the family. He became aloof, non-communicative, uncooperative and eventually rebellious and uncontrollable. Involvement with the police became more frequent and his parents were rapidly giving up on him.

During the following year his probation officer referred him to a residential treatment facility known as the Manhattan Project. When I revisited his home the following summer the change was remarkable. The boy had completed his year at school, was no longer using drugs, was communicative and cooperative around the house and was respected by his brothers and sisters.

This noticeable change in both behavior and attitude was somehow connected with the Manhattan Project to which he, as a resident, and his parents, as non-residents, had belonged. In an attempt to understand this particular program more fully I lived in one of the Project houses for a summer. From this experience grew the idea for Project 72.

Rise of the Therapeutic Community

Project 72 incorporates many of the features of a therapeutic community as described by Rochman and Heller (1974). It employs procedures which attempt to implement principles which Glasser (1965) described as Reality Therapy and integrates treatment (i.e. change-inducing procedures) within a philosophical framework which sees man as a free agent and not helplessly determined by biological,

sociological or psychological factors wholly beyond his control. In this framework each individual is challenged to assume personal responsibility for his thoughts, feelings and behavior. Self-actualization (ongoing realization of personal potential) is accepted within the Project philosophy as an essential goal of interaction and is encouraged over competitive relationships. Characteristically, all members of this type of therapeutic community are expected to make a commitment to face differences and conflicts openly and to resolve them constructively through authentic mutual self-disclosure. Basic rules and guidelines are clear and persistent violations usually result in separation from the family.

One of the first such therapeutic communities to be established and one which became a prototype for future development was Synanon, (Rachman, & Heller 1974), founded in 1958 in Santa Monica, California. Based on the self-help principles of Alcoholics Anonymous and employing a closed community concept emphasizing group encounter techniques, Synanon provided a new approach to the problem of how to deal with drug addiction.

By the mid-sixties, other programs modelled on Synanon had begun to spring up around the United States. Daytop Village was established in New York State (Bassin, 1974). The principles of reality therapy were applied; emphasis was placed on personal acceptance of responsibility for behavior and group concentration focused on "here and now" issues. Graduates of Daytop spread out to other urban centers and established such programs as Liberty Village (New Jersey), Gateway House (Chicago), and Portage (Montreal). From another offshoot of

Synanon, Phoenix House, in New York City, the therapeutic communities of Sera and Veritas were founded. All these early programs focused on the problem of drug addiction (Rachman, & Heller, 1974).

Odyssey House (Denser-Gerber, 1974), founded in New York City in 1966, took a somewhat different track. While the basic elements of the therapeutic community were retained, programming was geared toward re-entry of the resident into the economic mainstream of society. For this reason an on-site educational component was introduced whereby residents could upgrade themselves. Workshops and mini-businesses were established to promote development of vocational skills and interaction with the public. Job placement and follow-up of ex-residents were also high priorities. Perhaps, however, the most innovative aspect of the project was the establishment of specialized programs for different groups of drug dependent people. Adaptations were made to meet the special needs of adolescents, adults, parents, schizophrenics, and the gifted. The concept of mixed staffing was employed, in which professionals and ex-addicts worked together in therapeutic roles. This was a breakthrough from the initial suspicion of, and at times, open opposition to, any traces of professionalism within the therapeutic communities.

It is within this tradition, that Project 72 situates itself.

Local Needs

By the late sixties it became evident that the much talked about drug problem was also a reality in Canada. It was reported (Unwin, 1968) that there was a 300% increase of marijuana arrests and

convictions from January through October 1967 as compared with the same period during the previous year. In a study (Smeltzer and Riggs, 1969) of the Edmonton Public School system it was reported that fifty to seventy percent of the high school population had tried drugs, twenty-five percent of the student population could be classified as occasional users, and about five percent of the student body were dependent on drug usage. In a report presented by the Edmonton Drug Abuse Center (Trust Report, 1970), it was reported that during the period from July through October 1970 a total of 335 cases of drug abuse were treated, with clients ranging in age from 11 to 57 years.

While associated with a volunteer group organized by the City of Edmonton Social Services Department to work in the "drug scene", I became convinced of the need for some kind of support system for young adults who were motivated to change their life style. I stress the word "system" because it also became evident to me that whatever was established for such people must have the potential of counter-acting a drug drop-out sub-culture.

Counselling services of one kind or another were available within the community but in my opinion their effectiveness was hindered by what I would call "missing hours" - the long periods of time a client is out of contact with the counsellor. Institutions and group homes also existed to provide a residential setting but these generally seemed to suffer from a "lack of program" which could challenge an individual's sense of responsibility and commitment. To me, there seemed to be a need for something more.

The Manhattan Project Model

I spent the summer of 1971 in one of the residences of the Manhattan Project in Los Angeles, California. This experience impressed me in that I found program procedures consistent with stated goals.

This house is dedicated to the purpose of giving each person a new concept of life and we believe that this goal can be achieved if each member is committed to help himself become a whole person and a responsible citizen in a free and law-abiding society. Secondly, he shall be responsible for utilizing his individual capacities to help others achieve his goal.]

This summarized the Manhattan Project. Begun in 1962 as a counselling service of the Salvation Army in Los Angeles, the handicap of "missing hours" quickly brought its founders to recognize the need for a residential setting and so the Manhattan Project as such came into being. The most credible feature of the project to me was its evolutionary character. Rather than being the implementation of some theoretical brain-child, the program developed on the experience of the years while remaining faithful to essential underlying principles. These same principles are reflected in Project 72.

The target population of the Manhattan Project was urban. Based on the premise that separation from past associations was conducive to change in individual patterns of behavior, yet aware that its whole purpose was to help individuals to cope better with the urban environment to which they could return, Manhattan adopted a procedure which I would describe as psychological rather than geographical separation. By this, I mean that an individual must separate himself from contacts

with past places, persons -- even family, while still living in an urban milieu. Participants who entered agreed to assume responsibility for behavioral change and could not use physical separation to escape facing the realities of everyday urban life. This again underlined the option of Manhattan to work only with those who were sufficiently motivated, as attempts to deal effectively with those who had not yet decided that changes were necessary was most often abortive. Project 72 shares this line of thought.

Consistent with this choice of an urban setting the program was "community orientated". The intent was not to create self-contained residential units or closed communities but rather to encourage residents to integrate back into society and the community in which they lived. Thus, finding a job or attending school was considered a basic requirement, as was the idea of having a strong commitment to the program. To this end individuals were given ample information on what would be expected of them, and were then asked to make a decision and see it through. As noted in the "statement of purpose", this concept of commitment is also seen in a communal light. Such a self-help program cannot be carried out in isolation, but is based on mutual commitment for care and concern among members.

Certainly one of the most evident features of the Manhattan Project was its program structure. While expectations and procedures were spelled out in great detail, the program was not weighted with useless legalities. There was built into the structure the necessary mechanisms to allow for individual growth in freedom, provided of course a corresponding development of responsibility was shown.

All of which was encapsulated in the motto: "Show me, don't tell me". My experience at the Manhattan project was that this type of structure provided the consistency and constancy required for an individual to re-structure his own life. Also, from a purely functional point of view, such a structure avoided the inevitable authority "hassles" caused when duties and privileges are negotiated and/or decisions made arbitrarily.

It was evident on entering any one of the residences of the Manhattan Project that a pleasant physical atmosphere existed. Residences were unmarked and were furnished with a sense of taste and durability. Emphasis was placed on creating a home atmosphere. A clean, comfortable and well-furnished home gave the residents something to be proud of. Household cleanliness and upkeep were a shared responsibility among residents and staff, and there were no arbitrary prerogatives for staff. Project 72 has followed the Manhattan model in this respect.

The target population for Manhattan's residential program were young male and female adults (16 - 21 years). The therapeutic focus was on group interaction rather than on individual counselling. Thus, co-education, a young adult age group, and group interaction were further factors incorporated into the design of Project 72.

Genesis of Project 72

After my Manhattan experience, I spent a year in discussion and consultation. An initial task force was set up including a judge, lawyer, doctor, business man and probation officer to assess the feasibility of founding a project based on the Manhattan model. Application was made to the Non-Medical use of Drugs Directorate of National Health

and Welfare, for financial assistance and in July, 1972 approval was received for a grant to cover operating expenses. A house was found, refurbished, and, due to the effectiveness of our task force and community support, fully furnished. To be officially recognized as a social entity, the project was registered as a society with the Government of Alberta and approved by the Federal government as a charitable organization. In order that the program itself become operational, it was necessary to form a core group of people familiar with the Manhattan model. Two residents and an ex-resident were invited to Edmonton from California to work with me. With them, the other hired staff person, and a group of volunteers we formed the nucleus of the resident and non-resident programs.

Anti-social behavior is seen within the project as a response and as such is taken as a symptom and not the problem. For this reason, criteria for membership is not based on the homogeneity of presenting problems but rather on the individual's desire to change his life style. Thus resident and non-resident members have included drug abusers; sexual deviates; those charged with assault, breaking and entering, car theft; young people who have dropped out of school or work or who are simply floundering without direction to their lives; and older adults struggling with marital, family, and personal difficulties. What brings them together is the awareness that the problem to be dealt with is secondary to the act of dealing with it. Project philosophy bases itself on the assumption that positive personality development occurs precisely in facing and dealing with life's problems. For this reason, the Project is open to anyone who may wish to

work things out in his or her life even though he or she may not bring a serious problem. On account of this, the non-resident program of Project 72 has taken on more extensive proportions than that of the Manhattan model where the number of non-residents associated with five houses was far less than the number presently active in Project 72, (Appendix 1, Page 75)₂

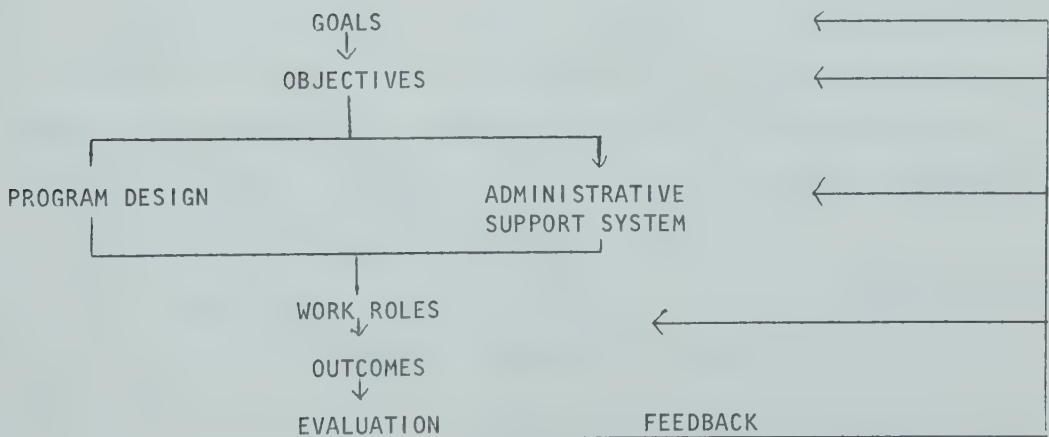
CHAPTER II

Theoretical Rationale and Structures

In an attempt to facilitate program evaluation and future research projects on Project 72 itself, this chapter has been organized on the basis of the model shown in Figure 1, (below) "Goals" are set as general statements of intent. "Objectives" are more specific statements of the intended results. "Program design" incorporates the concrete treatment procedures and techniques which are built on a set of basic principles and assumptions which hopefully bring about the realization of objectives and goals. "Administrative Support System" includes secretarial and clerical functions and designates lines of accountability. "Work Roles" are specific job descriptions and expectations for treatment staff, and "Outcomes" are the result of ongoing case studies and follow-up research.

FIGURE 1

Program Evaluation Model



Goals

The implicit goals of Project 72 touch on five areas of concern. Firstly, to provide a rehabilitation setting for drug abusers and other socially maladjusted young adults; secondly, to provide a re-socialization process for young, alienated adults who have come from institutional settings such as correctional institutions or forensic, adolescent and other psychiatric wards of hospitals; thirdly, to offer a constructive alternative to incarceration or other forms of institutionalization for those motivated to change; fourthly, to promote the learning of basic life skills within a residential setting where the environment is structured so as to intensify group interaction; fifthly, to provide a preventative program that can respond to the first symptoms of social breakdown and preclude the need for crisis intervention at a later date.

Objectives

Rehabilitative Objectives

The rehabilitative objectives of the Project are twofold. The first objective is to provide experiences which can create constructive alternatives to destructive or unacceptable ways of meeting basic human needs; specifically, through drug abuse and anti-social forms of behavior. In Table 1, page 13, basic existential needs are examined and possible alternatives and activities are suggested.

The second rehabilitative objective is to promote development of personality needs within the individual. From my experience in Project 72, I have isolated ten areas of development which I feel are necessary for healthy and mature personality growth.

TABLE 1

ALTERNATIVES TO DRUGS

<u>Level of Experience</u>	<u>Existential Need</u>	<u>Possible Alternatives</u>
Physical	<ul style="list-style-type: none"> - desire for physical satisfaction; - physical relaxation and more energy - relief from tension and sickness 	<ul style="list-style-type: none"> - athletics; exercise; - hiking; camping; - canoeing, winter work; - improved diet
Sensory	<ul style="list-style-type: none"> - desire to stimulate sight, sound, touch, taste, (i.e. magnify sensorium) 	<ul style="list-style-type: none"> - sensory awareness training; experiencing - beauty of nature
Emotional	<ul style="list-style-type: none"> - relief from psychological pains, i.e. loneliness; attempt to find instant solution to personal problems, relief from bad mood; escape from anxiety; desire for emotional insight; liberation of feelings; emotional relaxation 	<ul style="list-style-type: none"> - individual counselling; - group therapy; - instruction in personal development
Interpersonal	<ul style="list-style-type: none"> - to gain peer acceptance; to break through interpersonal barriers; to "communicate" (be understood); defiance of authority figures; cement two-person relationships; relaxation of interpersonal inhibition; solve interpersonal hang-ups. 	<ul style="list-style-type: none"> - sensitivity, encounter, communication groups; - instruction in social customs; social and interpersonal counselling; emphasis on assisting others, commitment to care and be concerned for others.
Social (Including cultural and environmental)	<ul style="list-style-type: none"> - to exercise individuality; - to find social identity; - to promote social change; - to find identifiable sub-culture; - to tune out intolerable environmental conditions, e.g. broken home 	<ul style="list-style-type: none"> - community action; speaking engagements; purposeful activities; volunteer work
Political	<ul style="list-style-type: none"> - to identify with anti-establishment subgroup; desire to change "the system" desire to gain wealth and exercise political power. 	<ul style="list-style-type: none"> - participation in non-partisan projects; field work with politicians; experience of authority in decision making.
Intellectual	<ul style="list-style-type: none"> - to escape mental boredom; answer curiosity; gain insights and understanding in world of ideas; to study better; to research one's own awareness i.e. know oneself better. 	<ul style="list-style-type: none"> - intellectual excitement through reading, discussion; creative games; fantasy exercises; memory training.
Creative Artistic	<ul style="list-style-type: none"> - to improve creativity in the arts; to enhance enjoyment of music and the arts; to be entertained. 	<ul style="list-style-type: none"> - non-graded instruction in producing and/or appreciating art, music, drama, crafts, cooking, writing gardening; planned use of leisure time.
Philosophical	<ul style="list-style-type: none"> - to discover meaningful values; to grasp the nature of the universe; to find meaning in life; to organize a belief structure. 	<ul style="list-style-type: none"> - discussions; seminars; study of ethics, morality; nature of reality; intro to philosophical literature; guided exploration of value systems.
Spiritual Mystical	<ul style="list-style-type: none"> - desire to transcend "orthodox" religion; to develop spiritual insights; to reach higher levels of consciousness; to communicate with God; to intensify "religious" experience; to obtain higher spiritual powers. 	<ul style="list-style-type: none"> - study experience of different religions and sects, intro to applied mysticism; prayer; scriptural reading; meditation; yogic techniques; transcendental meditation.
Miscellaneous	<ul style="list-style-type: none"> - Quest for adventure; risk; challenge; "kicks" 	<ul style="list-style-type: none"> - survival training; pro-naturalness, attitudes travel; meaningful employment; innovative educational programs.

These areas form to a large degree the thrust of the rehabilitative program.

1. Self discipline
2. Acceptance of responsibility
3. Commitment
4. Self-worth
5. Experience of success
6. Healthy interpersonal relationships within the family nucleus
7. Healthy peer group relationships and the challenge to experience new ways of living
8. Open interchange of ideas, beliefs and concerns
9. Sense of purposefulness in one's life
10. Social concern

Most of the individuals with whom Project 72 has dealt have shown a lack of development in nearly all these areas. Perhaps the most evident of these is a lack of self-discipline which is usually manifested in their inability to delay gratification. Another obvious area of underdevelopment is in a sense of responsibility which is defined within the Project as the ability to accept logical or natural consequences for choices made or the ability to live up to accepted expectations. Our experience has shown that many individuals show a lack of sense of commitment whereby one freely binds oneself to do something over a given period of time. We have also found that if such determination to persevere is to endure it must surpass the readily changeable feeling level and rest rather in a strengthened will power. In reference to self-worth, the Project attempts to increase one's awareness of personal, positive potential and to increase one's experience of success by providing opportunities to achieve rather than to fall short of self or other's expectations.

Due to poor family situations or broken homes, many of the individuals who have come to the Project seemed not to have experienced

within their family nucleus an environment conducive to the establishment of healthy interpersonal relationships. It is one of the objectives of the Project to provide a more healthy environment.

Another identified area of need for growth among members is the general lack of challenge and opportunity to experience and experiment with new ways of relating to peers. We have found that individuals often don't know how to get out of a non-productive behavioral rut which reinforces the status quo and discourages non-conformity. We feel that individuals caught in such patterns lack the type of peer group relationships which challenge them to develop a life style consistent with more personally productive values and principles.

In many of the people associated with Project 72 over the years we have perceived the need for a forum of free exchange of ideas, beliefs and concerns which cuts across the barriers of age, sex, culture and creed. The Project tries to fill this need through the development of positive communication patterns among members.

Another area of development that we believe to be important for wholesome personality growth is a sense of purposefulness in one's life. This includes both a personal vision and a sense of service to others. In this way, one's life is placed in a context and there is an experience of belonging rather than the disjointed feeling of alienation. From the above, flows a sense of social concern which demands duties to others arising out of group membership. Without this, deviant behavior becomes acceptable and social conscience is blunted.

Resocialization Objectives

The resocialization objectives of the Project focus on the development of healthy independence and personal autonomy, as well as integration into the community. In the framework of Project 72 healthy independence involves co-existence with, and openness to, the social structures in which one lives. This, however, must avoid extremes of unquestioning conformity or blind rejection. We feel that socialization must also bring a reality factor into awareness. Personal opinion or belief alone cannot change social structures and so one must learn to operate within them. The reality of the present social system accepts two alternatives for active membership: school or work. To drop out from either, regardless of the legitimacy of the reasons, is to take oneself out of the main stream of the society in which we live.

Alternatives to Incarceration

As a constructive alternative to incarceration Project 72 attempts to provide a viable choice for those already institutionalized. I feel that part of the reality of our society is the fact that incarceration is a consequence of certain convictions. In an attempt, however, to be lenient with younger offenders many are given terms of probation in lieu of incarceration. This I feel is counterproductive. Not only does the judicial system lose credibility by being inconsistent but also the offender is exempted from facing a logical consequence.

Concern about sending young, especially first, offenders to jail is certainly well founded. My hope would be, not to have

a more institutionalized setting.

Life Skills

Project 72 objectives in regard to the learning of basic life skills focus on five areas enumerated as follows:

1. to learn skills for better personal and interpersonal development
2. to learn how to cope better with home and family responsibilities especially in the exercise of leadership and the use of authority
3. to discover a more productive use of leisure time
4. to learn to meet social responsibilities
5. to learn how to make responsible decisions for the future.

The Project provides the opportunity to learn these skills through the experience of living situations and not merely as an academic exercise.

Preventative Objectives

Due to the fact that the overall thrust of the program of Project 72 is to assist people in developing the self-awareness and knowledge, communication skills, and self-confidence, which will enable them to lead more useful and satisfying lives--all the previously mentioned objectives are considered to be preventative by nature. However, by tuning in to the first signs of social breakdown within an individual or by responding to needs within him that can forestall consequences beyond his control, specific areas for preventative objectives can be isolated.

I understand social breakdown to involve a growing disruption in healthy, interpersonal relations or an increasing adoption of anti-social attitudes by an individual. Thus he becomes alienated from the society and community in which he lives. The Project responds to the first symptoms of social breakdown by providing a resident with explicit and concrete expectations and responsibilities in a controlled family setting. This is especially important for many adolescents and young adults who have not experienced these in their own family upbringing. I see the family as our first school and lessons unlearned leave deficiencies which complicate life in later years. But more than being recognized, a deficiency must be remedied.

Residents of Project 72 are given the opportunity to develop new attitudes towards society especially establishment, authority figures and structures by basing the relationships of residents and staff in a family context emphasizing individual dignity and worth, rather than in an institutional context emphasizing role structures. For all members there is the opportunity for breaking down generation-gap feelings through honest, open, personal interaction which again stresses human equality and not status or role. The challenge is presented to all regardless of age, sex, origin or creed to come together to work things out constructively in their lives and so to keep situations from getting out of hand.

The Project also provides an opportunity to experience being of service to others thus exploiting the innate potential which members have, to support one another. For this reason they are encouraged to keep in contact with one another after they leave. It is also

hoped that they can be living examples to others on the street that changes in life style are possible. The Project then, provides a common ground for members and ex-members to relate as part of an extended family which is a novel experience for many who have been deprived of a meaningful family experience earlier in life.

Program Design

Resident and Non-Resident Programs

Project 72 offers two distinct yet complementary programs -- residential and non-residential. Priority is given to the resident program for which the Project was initially established. It is on the basis of assessed personal need that individuals are orientated to one or to the other. As a rule of thumb the non-resident program is open only to those who cannot be residents because of marital status, working hours or perhaps age. For this reason, a decision is made by staff to disqualify from non-residency someone who could be a resident but chooses the less intensive non-residency program. It seems that because of the intensity of the live-in situation it has shown itself to be more effective in bringing about changes in basic life style than has the non-resident program which is geared mainly to support people who are already endeavoring to deal with specific aspects of their lives. Some prospective members are attracted by the social aspect of support and companionship, yet do not want to face up to more pressing issues and painful personal areas of need that require precisely the intensity and constancy of the residential program. Here is where I feel that staff must have

clear criteria to assess the capacity of the program to meet individual needs.

The non-resident program also provides an opening to incorporate support persons in to the Project. As will be discussed later, this is the way that many of our co-leaders for group are included in the project structure.

There is an element of transferability between the resident and non-resident programs. Residents who finish the program are generally encouraged to become non-residents for a period of time and non-residents who perceive the need for more intensity may apply for residency. At times, too, the non-resident program serves as a holding ground for prospective residents when no vacancy is available. Non-residents may participate in resident program activities to the extent they consider necessary. This provides support to those who have either lacked or lost the support that a family nucleus can provide in dealing with the demands of modern urban life.

Admission Procedure

The admission procedure for both programs brings out the underlying principle of motivation, commitment and responsible decision-making which involves knowledge, experience and free choice. Admittance to the program is made on a referral basis only. A printed intake procedure form outlines the steps in the process. Referrals can be made by anyone in the community but in all cases a Project 72 referral form must be completed by a qualified individual or recognized agency. This is the first item to be included in a resident's

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personal file.

At the time of making the referral a screening is scheduled and this takes place at the residence. This orientation allows the prospective client to hear something about the program, to talk to some of the residents, to tour the house and to ask questions. Those making the referral and/or parents are invited to attend this screening which also gives them the chance to screen the Project. If the referred person is interested in finding out more about the Project he is invited to attend Thursday Night Group but it is always up to him to phone our office and place his name on the attendance list. This step also applies to those interested in the non-residency program.

If further interest in the program is shown the opportunity is given to the prospective resident to do a weekend as a guest. This means staying in the residence from Thursday group until Sunday evening, so as to have a first hand experience of what really goes on. On Sunday evening, the prospective resident may apply to stay the next week as a guest and thereby participate in the entire program. If application is made, immediate acceptance is determined by vote by all residents and staff present. Every vote must be accompanied by a statement of reason.

The prospective resident then continues to live in the house for a full week. This week provides an opportunity for the prospective resident to come to a clearer understanding of the expectations attached to residency and gives the residents a better chance to get to know him so that their final vote will be better founded. Intake forms are filled out which include further personal data, social

history and on-going school and work records. These are now added to the individual's referral form to begin his personal file. His name is entered on our nominal roll which records treatment days. From the beginning of the probationary week the individual is expected to follow the daily program as if in first phase and to begin to regularize school or work attendance. When deemed necessary psychological, medical and vocational assessments are arranged. During this first week, guests are given a Resident Orientation Brief (See Appendix 3, page 93) which outlines in written form the expectations and procedures involved in residency. He is also provided with a Resident Orientation-Summary (See Form 1, page 80) which gives a more explicit synopsis of the responsibilities and privileges associated with the different phases.

In short then, the admission procedure for a resident is complete when he has finished his trial weekend and week and has been voted into residency. At this point he is officially in the first phase.

For non-residents the process is completed after attendance at four, consecutive Thursday Night Group sessions at which time the individual is given the opportunity to apply for non-residency. This request is then voted on by non-residents, residents and staff. All the requirements for non-residency are outlined in a Guest Orientation sheet given on one's first visit to the Project (See Form 2, page 81). If an application for either residency or non-residency is voted down the opportunity is always given to re-apply.

The Phase System

The phase system is central to the resident program. First phase is seen as a phasing-in period. For this reason, the individual is asked to cut off all contact with his past associations, even family. The idea is to have him concentrate all his energy upon the task at hand with as little interference as possible from outside sources. It is emphasized, however, that he must do this on his own as he will be on his honor not under surveillance. He must leave the house every day for work or school and so is literally on his own for most of the day. It is also made clear that the Project is only as far away as a phone and should hassles become too great he can always return home and talk things out. Since privileges are seen as exemptions within the structure of the Project and result from evidence of living out responsibilities assumed -- the show me don't tell me principle -- there are no personal privileges in first phase. Second and third phase are considered as the working phases. During this time more leadership is expected of an individual and correspondingly more options from structured time are given. The most noticeable difference between these two phases, from the point of view of privilege, lies in the concept of weekends off. In second phase, weekends off are always qualified as in residence. This means that one is not required to participate in scheduled weekend activities during the day but does have to be back in residency by a given curfew hour. In third phase, residents also have weekends off out of residence which means that there is no obligation to return home Friday or Saturday night. This procedure aims at thwarting the development of an overdependence on the Project structure to

provide security. It is considered important during this period that residents experience a sense of complete freedom so that they can assess their ability to handle it. Fourth Phase is a time of phasing out. During this period the resident is required to participate only in house meetings and Thursday Group but is asked to co-operate in other activities as he sees fit. To emphasize his coming-of-age he is given a key to the house and may come and go as he pleases. This then, is the proximate step to having finished the program. At all stages one moves from phase to phase by presenting a self-evaluation and receiving approval for the move from residents and staff.

Termination

In both the resident and non-resident programs termination can take several different forms. First of all one may finish with blessing when his peers and staff concur that he has accomplished what he had set out to do.

One may also request a leave of absence which is a stipulated period of time for one to be excused from active participation in the project. For residents this serves as a time for them to reassess the reasons for their being in residency, and for non-residents it often serves as a way of remaining part of the Project when, for a valid reason, one is not able to participate actively. Whatever the reason, however, leaves must be approved by the Operations Board which is composed of staff with residents and non-resident representatives.

The third way of terminating is by simply dropping out or being asked to leave. Instances of premature departure usually have ban as a consequence. The concept of ban applies reverse logic to what is

asked in first phase. When an individual chooses to come into the Project he is asked to cut off all past contacts so as to have as little interference as possible in living out the new choice he made. Consequently, when one chooses to leave he should have to face the consequences of that choice with no strings attached. Ban means that one can have no contact with the Project for a given period of time as stipulated by residents and ratified by the Operations Board. Those who take a leave of absence are eligible to come back into residency at the same phase level at which they left, whereas those who simply leave must begin in phase one if they desire to return. In all instances of termination for residents a Closure Report (See Form 3, page 82) is written up and placed in the individual's file.

Explanation of Daily Program

The daily program for residents is outlined on Form 4, page 83. The week's activities begin on Monday evening with a Capables Meeting when second, third and fourth phase residents get together to plan assignments for the coming week and review tour reports from the previous week. Staff are not present at this meeting unless invited, and in fact, submit to Capables a coverage report of the past week's events along with points for discussion. (See Form 8, page 87). The meeting is run according to the format as shown in Form 5, page 84. Capables, (the corporate name given to participants in this meeting) themselves draw up a schedule indicating on a weekly basis who the leader of the meeting is to be, who are to lead tours (organized activities) for the coming week, who is to give a self-evaluation, who will be the weekend assistant, who is on or off for the weekend and who are to prepare the

community supper. It is encouraged, and soon found to facilitate smoother running of house affairs, when all these things are scheduled several weeks in advance. Tours refer to definite programmed activities such as grocery shopping and laundry, or organization of a group entertainment, activity or seminar. Tour reports are written accounts of the event by the one who was in charge of it. Outlines for these reports are given in Forms 6 and 7, pages 85, 86. The idea behind the written report is to help increase the awareness of the individual in charge to the people on the tour. It is understood that a tour leader makes all final decisions that effect the group while he is in charge. The tour reports are reviewed by Capables and judged according to depth of perception, accuracy and completeness. A fail means that it must be rewritten.

Capables then prepare a brief agenda of material for discussion by the whole house (including first phase residents and staff). Discussion here usually revolves around more domestic problems such as house jobs or proposed events for the house. Then follows a planned activity (usually recreational), or a seminar which is intended to be a learning experience and may involve input from outside sources.

Tuesday night is taken up by the resident house meeting. This is when resident self-evaluations are presented to the group. (See Form 9, page 88.) These generally prove to be very revealing in-depth personal assessments and the feedback they engender is intended to verify self-perception with that of others. The general body of the house meeting will follow one of two formats which vary on a weekly basis.

The rotational format is a heavily structured way of promoting interchange and feedback among residents. Previous to the meeting they

are given a Weekly Rating Sheet, (Form 10, page 89) which they complete by rating themselves and all the other residents according to the scale provided. The Task Scale is used to mark the items marked with an asterisk and on successive weeks one of the other scales is used to mark group participation and ongoing personal relations with individuals. One of the staff who is present at this meeting records the marks on a Master Rating Sheet (See Form 11, page 90) which is kept on record. Consensus marks (compiled averages) are posted on the bulletin board.

4

Wednesday is marked by community supper which is prepared by the persons designated by Capables. To emphasize that position does not exempt from the responsibilities of shared living, staff members are included in the list of those cooking community supper. Wednesday evening is free for all but first phase residents.

Thursday is by far the most active night. The first event is the meeting of the Operations Board when the Capable Notes from the previous Monday are read and the weekend program is finalized. (See Form 12, page 91). This meeting is a vital vehicle of communication between Capables and staff as can be seen by comparing Capable Notes (Form 5) with Board Meeting (Form 12). Both provide space for recording specific items to be considered. Board requests are then reviewed. A board request is necessary for any desired activity not provided for by existing structures. It serves a dual purpose of giving elasticity to the structure by providing for individual needs, and of helping individuals to plan things in advance, as no change in program will be contemplated in an on-the-spot confrontation. After the Operations Board has met, group leaders meet with staff to draw up the groups for the evening.

Group itself begins with an introduction of guests, an outline of the weekend residency program, a reading of the Statement of Purpose, and announcements. Usually the large group is broken up into five smaller groups which then move off to pre-assigned areas of the house. After a period of about an hour and a half the large group again comes together and at this time non-resident admissions and self-evaluations are heard. After a theme song and coffee, the group leaders again meet with the staff for a debriefing of the evening's events.

The weekend, Friday through Sunday, is taken as a separate unit. A Duty person who is usually a staff member, but may also be a third or fourth phase resident, is free to organize the weekend as he wishes but the usual procedure is to hold Rent Meeting and Tours on Friday evening. All residents work on a basic budget of thirty-five dollars a week. Those who have jobs are encouraged to place excess funds in a bank account but they are free to dispose of their money as they please after they have prepaid monthly into the Project an amount to cover expenses. Residents who attend school must be subsidized by family or government sources. A Rent Meeting each resident receives his thirty-five dollars in an envelope from which he must pay back ten dollars for rent, four dollars for house fund which includes household staples and cleaning supplies, one dollar for community supper, and any loans for fines he has accumulated during the week. Then follows Grocery Tour when all go to a supermarket to do their own personal shopping. Each resident is responsible for buying his own food and preparing his own meals. Nine to eleven dollars must be spent weekly on food. The remaining money is for personal expenses. After Grocery Tour all proceed on to a laundromat to

do their personal as well as the house laundry.

Saturday morning is devoted to the general clean-up of the house, an activity which is organized by a resident. At night there is an entertainment tour which has also been organized by a designated tour leader. Sunday is generally a free day and the weekend closes with a Weekend Review meeting when people can talk about their weekend and give feedback especially as regards the conduct of the duty persons and tour leaders. This emphasizes the principles of accountability. Those to whom authority has been given are made aware of how others feel about the way they used their authority. If there are resident-guests this is the opportunity for them to stand and request admission into residency.

In order to keep an ongoing record of events in the house it has been found very useful to have a daily logbook available to those covering the house. All significant events are recorded and so staff can keep abreast of what is going on even when they are not present in the house.

Total-Program as Related to Objectives

At this point, I would like to isolate program activities and structures in order to relate them to the various objectives that were presented earlier. (The reader might find it helpful to consult the Index of Contents, Appendix 4, page 99.)

In regard to the first rehabilitative objective of providing constructive alternatives for anti-social forms of behavior in fulfilling basic needs, the Project works at various levels.⁵ Physical needs are provided for by Monday night activities when gym facilities are avail-

able, and by special summer and winter recreational programs when holiday time and long weekends are utilized to get out of the city for camping, canoeing, hiking, skiing and skating. Seminars have been held on nutrition, and on outdoor skills such as map or compass reading. The pleasant atmosphere and decor of the residence itself makes for more relaxed living.

Sensory awareness exercises and exposure to the beauties of nature through camping and outings, help meet needs on the sensory level.

Emotional needs are met by encouraging people to talk about feelings they experience. For this reason it is understood that any resident has the right to call a House Meeting at any time to clear tensions. A Feeling Book is available to those who find it easier to express themselves through the written word. Tuesday night focus or rotational, Weekend Review and Thursday Night Group provide ample opportunity for individuals to clear feelings with others. The fact of being voted in and the custom of expressing acceptance and greeting with a hug, all add to an individual's emotional fulfillment. So too, the basic consistency and stability of the structure can provide relief from anxiety and emotional tension.

Interpersonal needs are met by encouraging communication and feedback between individuals through Tuesday night rotational and Thursday Night Group which focuses on sensitivity awareness, encounter and communication. The idea of making a commitment to support others and of receiving the same from them also adds an important dimension to the experience of interpersonal relationships.

On the social level individuality can be expressed by exercising phase options for Monday and Wednesday night and weekends off. There

are almost daily opportunities for residents to be hosts to guests visiting the house. Residents are asked to participate in screenings, learn to contribute to the ordinary material needs of the house by paying into a house fund, and are encouraged to meet the special needs of the group by organizing and participating in special projects such as bottle drives. In the past these have been used to purchase cookware, a piano, sporting goods and the installation of cable T.V. Such purposeful activities promote a sense of cohesiveness, solidarity and group identity.

In response to political needs based on the possession and exercise of effectual social power, Project members are given the opportunity to conduct their own meetings, draw up schedules, pass or fail reports and suggest changes in the running of the house. So too, they are invited to participate with staff in decision-making through the Operations Board. Members have also become involved in social issues through participation in social action groups and have worked on civic political campaigns.

The need for intellectual and creative stimulation is satisfied in several ways. Information is made available through subscriptions to magazines and newspapers, and by seminars on such issues as family life, social justice and legal rights. Open discussion of beliefs is encouraged. Members are introduced to psychological theories such as transactional analysis by explanations of such concepts as Trading Stamps and Fuzzies. The use of definite scales in the Tuesday night rotational meeting helps develop insight into the factors of personal and interpersonal growth. Simulation and creative games and exercises promote experiential learning in areas of social justice, values

clarification and group dynamics. Fantasy exercises stimulate the imagination. The Project encourages self-expression and seminars have been conducted in relation to public speaking, poetry, writing, and graphic art. Originality is encouraged in choosing entertainment tours that provide exposure to new possibilities for spending leisure time apart from the old standby of going to a movie. Entertainment tours have included such activities as go-carting, miniature golf and bowling as well as theatrical events, symphony and ballet.

Experience in the Project has shown that only after basic psychosocial needs are met does an individual come into contact with deeper philosophical and spiritual needs. Caution is taken not to force issues but, when appropriate, special seminars and discussions are held on moral issues and values. For those who express an interest, explanations of and experiences of prayer, meditation, scriptural reading and yoga techniques are given. People qualified in spiritual counselling are also available for consultation. Sunday is generally left as an open day and residents are free to attend any church or service. Individual energies aimed at adventure, risks and kicks are directed to new ways of fulfilment by survival training, camping, travel and generally living up to the challenge of the program. A good school program and meaningful employment have also proved beneficial in this regard.

Still within the area of rehabilitative objectives, the Project tries to help fulfil unmet personality needs within the individual. Two areas of prime focus are self-discipline and responsibility. The general structure of the phase system especially the practice of week-ends on and off; the six cardinal rules clearly stated in the Resident

Orientation Brief, (Appendix 3, page 93) the requirements to follow a schedule for leading tours and doing general clean-up; the expectation to make one's bed, cook one's food, do one's laundry and complete a daily house job all challenge self-discipline by forcing a self-structuring of time and by openly conflicting with the tendency to do only what you feel like. In Project terms, self-discipline and responsibility go hand in hand. By responsibility it is meant the acceptance of the consequences of choices made. In this sense, development must take place in one's decision-making process. From a pattern of hasty, often impulsive decisions, one must come to a more thoughtful way of making decisions based not only on feeling, but also on reason. The result is the development of a sense of behavioral and social responsibility in both accepting consequences of decisions and in living up to accepted expectations. The intake procedure stresses the point of becoming informed before making a final decision. By requiring that guests themselves make the arrangements to follow up on the initial screening, onus is immediately placed squarely on their shoulders. Likewise, it is up to the individual to make the financial arrangements necessary for him to come into the Project, and part of the requirement for finishing the program is that financial arrangements have been arranged to make leaving economically feasible. In these areas, staff members are always available to support and help but only when asked, as initiative must come from the individual. The Project's principle is to support not to initiate. While in residency small loans may be made from house funds but these are due by the next rent meeting. Fines may be given by staff or residents for such things as leaving dirty dishes in the kitchen, making a mess in some area of

the house or swearing. These are written out at the time on a piece of paper which is attached to the individual's envelope at rent meeting. At rent meeting he must read out the offense and suggest a suitable fine -- either monetary or labourwise -- which can be ratified or changed by the group. Personal effects which are left lying around are subject to confiscation and auction at the next rent meeting. The idea of the board request also accentuates the need to plan things in advance and a contract book is used as a stimulant to fulfill personal objectives. Contracts are written by the individual to do or to avoid doing something for a given period of time with a definite consequence of non-compliance.

An introduction to the concept of commitment comes early in one's association with the Project. Right from the day of the initial screening it is stressed that becoming a member of the Project requires that one be serious about doing something about oneself and be willing to support others in their quest for change. Every Thursday Night the Statement of Purpose is read aloud to remind everyone of why they are there. Graphically all names of residents, guests and non-residents, are listed on an Operations Board placed in a conspicuous location to act as a constant reminder of who are in it together.

The need for self-worth is met by emphasizing positive feedback to the individual to increase awareness of positive potential within himself. Again, experience in the Project has shown an individual is often hardest on himself, and the result of hearing about positive qualities from one's peers is staggering. So too, the realization that he can look after himself by buying and cooking his own food, doing his own laundry and paying his own rent is positively reinforcing.

Self-esteem is enhanced through recognition of achievement, as exemplified by the phase system and the implicit trust shown an individual from day one by having no direct supervision of him when he is expect to be attending school or work. Self-confidence is increased through seminars or public speaking and the practice of conducting meetings, organizing tours and activities, greeting guests on Thursday Night and fulfilling outside speaking engagements on behalf of the Project.

Success is experienced through the realization of progressive expectations as provided by the phase system. Daily feedback is given by means of posted sheets where marks for bedroom, house job and kitchen duty are recorded on a one to five scale. The fact of moving from one phase to another and the graphic recognition of this on the operations board all all to one's sense that he can achieve something if he sets out seriously to do it.

In order to make up for deficiencies in the establishment of healthy interpersonal relationships in a family context, practice within the Project promotes experiential learning of key concepts. Equality by reason of the dignity of the human person is emphasized in that there are no arbitrary prerogatives in the program. Staff and residents must both abide by the basic guidelines and structures. To make the exercise of authority meaningful, it is recognized that on tours, for instance, even staff fall under the leadership of the tour leader. Differentiation among members is therefore recognized according to function and growth in assuming responsibility. Distinctions, however, are recognized in the phases and by reason of staff roles. As one advances through the phases more is expected of

him: from fulfilling the bare essentials of phase one, to taking on added responsibilities in higher phases for such things as covering the house, assisting on weekends, giving out of loans, or even being in charge of the house for an entire weekend. House jobs follow a hierarchy based on evidenced responsibility, not arbitrary decisions. From taking out the garbage one may run the gamut through to Operations, who checks and changes all other house jobs. House jobs include the power to fine individuals who abuse the designated area or even to place an area on ban which puts it off limits to everyone for a given period of time. This is the ultimate weapon. Yet in the Project's philosophy, authority entails service and so by custom the duty person and assistant on the weekend prepare a community breakfast for the rest of the house. In these ways each resident is given a constant challenge and opportunity to experience healthy interpersonal relationships within a family nucleus.

It has been found that growth in interpersonal relationships is closely linked with healthy peer group relationships. The Tuesday and Thursday Night Groups which encourage and facilitate feedback and interaction, as well as the self-evaluations which increase self-awareness and promote self-disclosure, are both novel experiences for most new Project members. Healthy peer group relationships are formed in an atmosphere of trust and honesty. Whereas, before association with the Project, a resident or non-resident possibly needed a strong defense system of coldness, sarcasm, and distance from people in order to survive, he now learns that in this new environment where people genuinely care and do not seek to hurt or reject him, he can dare to lower those defenses and become more trusting, affectionate, and

vulnerable in his relationships. Even more, he learns that true care for him includes confronting him with unpleasant feedback on some of his behaviours, attitudes, and personality traits. The fact of being challenged in this way is an unusual experience for him and he gradually understands it to be a sign of care and support when it is backed by people's willingness to help him tackle weaknesses within himself. There is an unwritten rule in the house that there are no secrets, and bringing things up in group is a definite responsibility. This goes contrary to the broadly accepted taboo against ratting, but certainly fosters an openness and trust within the entire group. When group members abandon their masks, nicety and faked pleasantness and truly confront one another they then find it increasingly and almost automatically easier to express gentleness and affection to each other. A growth in healthy peer group relationships is, therefore, specifically fostered by the Project program. This growth subsequently creates whole new possibilities in ways of living with people.

Thursday Night Group provides an excellent forum for the exchange of ideas, beliefs, and concerns. The variety of people of different ages, of different social, ethnic and educational backgrounds, of different interests and creeds, and of different cultures provides the raw material for stimulating interaction.

In order that Project members begin to fill their need for a sense of purposefulness in their lives, each individual, from the moment of applying for admission, through self-evaluation, must state what his personal objectives are for the future. Each member is also encouraged to find meaning in his life by his service to others.

There are specific house jobs which help the individual develop this sense of service. Thursday Night Guest Master is responsible for meeting guests, arranging for coffee and cookies or buying a cake when birthdays occur. The House Shopper must assure an adequate supply of household staples, fruits and vegetables and cleaning supplies. Thus, each person has adequate, concrete opportunities to specify his own personal goals and to find added purposefulness in his life by reaching out in service to others.

This objective of service to others is closely allied with the last rehabilitative objective of social concern. When one belongs to a group there are automatic duties associated with membership. Membership in a family is the first experience people have of social responsibility. Thus in the Project, importance is placed on doing one's house job, making one's bed, keeping things neat, and looking after house supplies, not for personal recognition but out of respect for the family to which all belong. Less tangible, but nonetheless important, aspects of this respect for the Project family include confidentiality, loyalty, honesty and generosity.

Specific program activities and techniques are designed to achieve the resocialization objectives of mature independence and social integration. The development of healthy, personal independence whereby one gradually takes control of his life and relies on his own resources is furthered by the privilege system of the phases and the experience of budgeting and doing personal shopping, cooking and laundry. Integration into the community is promoted by the ongoing requirement of school or work and the realization that one is obliged to contribute to one's own upkeep by paying rent. Integration also

requires the assistance of vocational counselling which is provided for in the Project program.

As far as the resocialization objective of providing an alternative to incarceration is concerned, to date the only possibility for implementation of this objective has been through use of day or weekend passes which enable individuals to participate in Thursday Night Group or specific activities but do not permit total, uninterrupted participation in the program. Only when on parole is this possible.

From the point of view of learning basic life skills, five areas were previously isolated under "Objectives". The Project program is set up so as to help each member achieve all of these life skills. Interpersonal development is facilitated: through practice of listening skills such as repeating what was heard; in feedback to individuals through scheduled group, weekend review and impromptu house meetings; and in opportunities given senior residents to practice as third party facilitators as co-leaders in groups or meetings. Leadership skills especially in the use of authority are learned through leading tours, exercising prerogatives of certain house jobs, assisting on weekends, conducting meetings or granting loans from the House Fund. Pre-arranged use of leisure time is learned through advance scheduling and planning of entertainment tours, occasional contracts regarding use of time on weekends off and accountability to the group at Weekend Review. The social reality of school work is taken for granted and it is understood that residents will discuss with the house before changes are made in either school programs or job placements. The importance of intelligent decision-making is brought home by the admission procedure

and by the fact that premature departure results in ban. Thus, the learning of basic life skills is provided for within the program.

Prevention is seen as a remedial response to any evidence of social breakdown involving deterioration in interpersonal relationships or increase of anti-social attitudes. I feel that the program of Project 72 can adequately arrest the process of social breakdown provided the individual concerned is willing to cooperate. The program characteristics of explicit expectations; the development of a sense of personal, social and financial responsibility; the concrete processes for solving problems; the emphasis on commitment to others; the idea of equality; the concept of shared responsibility and accountability between residents and staff; as well as the principle that rights and authority are based on function not status prerogative -- all these serve as a deterrent to social breakdown within the individual.

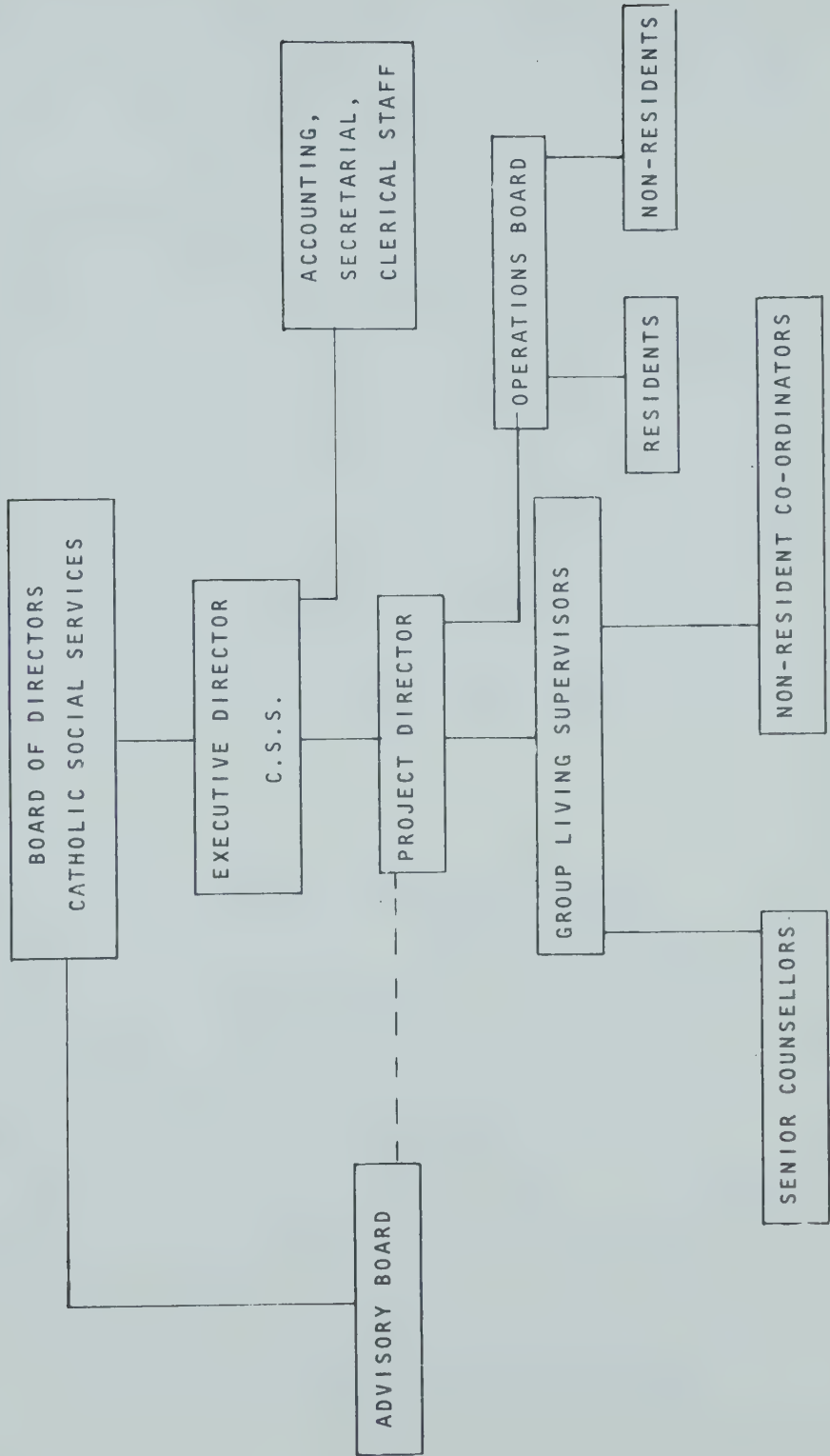
A second broad preventative objective is the preclusion of crisis intervention at a later date. By crisis intervention is meant the mediation by an outside party (professional or social agency) in the affairs of someone whose behavior is judged as detrimental either to himself or others. The Project is seen as a place to work things out for yourself. The non-resident program, special activities and openness of the Project to repeaters help realize this objective.

Administrative Support System

From the first moment of operation the Project required an administrative support staff. Initially we relied on part-time secretarial and clerical staffing but it soon became evident that the growing volume of business and increasing complexity of public

funding made it imperative to restructure our administration. In November of 1974 our Board of Directors made application for the Project to become a juridical agency under the administration of Catholic Social Services, Edmonton. This became effective as of January 1, 1975. As a result a new organizational structure emerged (See Figure 2, page 43). The Project Director is responsible for program and staff development and is accountable to the Executive Director of Catholic Social Services. The Advisory Board draws upon the expertise of the community and is chaired by a member of the Board of Directors for Catholic Social Services. Group Living Supervisors are responsible for the implementation of the program in the residences and are aided in this task by the Senior Counsellors. Non-Resident Coordinators are responsible for the management of the non-resident program and follow-up with ex-residents.

FIGURE 2
ORGANIZATIONAL FLOW CHART



CHAPTER III

Selected Case Studies

The following case studies have been selected as illustrations of marked behavioural and attitudinal changes in individuals within the framework of Project 72. These are not meant to be clinical studies for the purpose of understanding the origin and nature of disorders but rather synoptic accounts giving a brief social history as well as self-reported and observed changes to illustrate the working of Project 72. The individuals involved have given their verbal consent for this use and their identities have been concealed. Personally written self-evaluations have been used as the primary source for self-perceived change, and closure reports as an external source of observed achievement and change.

Danny

Danny was seventeen at the time of intake. His life pattern was more anti-social than self-destructive. Danny was the fifth child in a family of eight -- five boys and three girls. His parents are divorced and an older brother and sister had both served time in a penitentiary. He had a history of delinquency beginning around grade seven with about fifty offenses registered on his juvenile record. He had been placed in several different detention centers and was a repetitive runaway. He received six month's probation for car theft. His first adult offense was registered one month after turning sixteen. He dropped out of school after completing grade nine and had a very

Inconsistent work record. Referral reports indicated that he had little self-confidence, was easily led, had difficulty making friends, was very sensitive about his appearance (need for orthodontic work), and was somewhat hostile and critical of authority especially in reference to police and his mother.

After serving two months at Fort Saskatchewan Correctional Institution, Danny was transferred to the adolescent ward of a psychiatric hospital. He spent eight months there before receiving parole and coming into the Project. He finished the program and was out on his own for five months when he became involved in a joy ride that cost him six months in jail and forfeiture of parole. In this discouraging sequence of events a process of attitudinal change can be traced.

His first self-evaluation indicates the beginning of the process of re-evaluation of self-image and breakdown of blind defenses against negative feedback.

I am starting to look at the criticism that I don't agree with. This is something that I have never done before.

He goes on to point out the improvement he perceives in himself:

I feel my greatest improvement has been I'm starting to feel good about myself. My appearance doesn't bother me as much. I feel a lot more confident all around.

In setting out specific goals for himself he lists the following:

- to continue to build more confidence within myself,
- to start to let people know the real me [as soon as I find out who I really am],
- start being honest with myself,
- start paying attention to feedback that hurts instead of ignoring it,
- to stick to my job.

Consistent attendance at work was the most noticeable behavioral change in Danny. Slowly too, the experience of a new way of life, widened his

horizons. In his first evaluation he wrote that he wasn't sure what leadership meant for him. In second phase he wrote:

I feel I can now answer this question. I feel I can show leadership in my commitment to the house. Just by getting up and getting to work every day. In group I feel that I show leadership by using the group for its purpose to get to know myself better and to get to know the people in the house better. Also by doing my house job and coming in on time on my weekend off.

Growth in positive self-image is steady.

I feel good with myself. I like myself now. I have a lot more confidence in myself now. I feel much more aware of how other people see me after asking the people from the house. And I'm happy that people like me for the reasons I thought they did. My looks don't bother me now because I know at first a lot of people judge my looks first. But as soon as they get to know me as a person their judgement soon changes.

Concomitant with a more mature view of self goes a growing awareness of others and willingness to take the risk to share more with others, as he goes on to say,

I am being a lot more considerate of other people's feelings now. I see the greatest improvement in myself in that I now like myself. I feel much more confident in myself. I can now be honest with myself and others.

This is exemplified in the specific goals he outlines for himself.

Areas of changes I want to begin on is my relations with girls. To learn how to have meaningful relationships with girls. To learn how to develop proper ways of defending myself against being hurt, for I am a very sensitive person. Learning how to handle authority better. Finding friends outside the Project so when I leave I won't be alone out there. To learn how to relate with my mother again and feel comfortable around her.

It is also significant that Danny at this time invited his parole officer to hear him give his evaluation and under the section on personal relations wrote,

You are the best parole officer a guy could have. I can talk to you honestly and freely just as I can with the people from the house.

Two months later things were not going well. The newness and swiftness of perceived change within himself was slowing down. He had reached a plateau which to him was interpreted as a slump. The reality factor that, simply wanting things to be different does not immediately make them so, was becoming an evident fact. The expectations of the third phase, the strong feedback he received in the way he used authority and his failure to establish deep relationships outside the Project, especially with girls, all contributed to a return to defensiveness and repression of hurt.

I don't see no great improvement since my last evaluation. Like I said earlier, I feel I'm at a standstill lately which is making me really restless for I want to keep moving.

The last experience of success in meeting objectives, and defensiveness at being made aware of his power tripping within the house is reflected as he writes,

Well I don't really know what goals to set for myself right now, for I'm having a hard time in reaching my goals I set in my last evaluation.

A month later things were getting better.

I feel this [leadership] has improved a lot since my last evaluation. Example, doing my house job well again, taking responsibility for my feelings.

The lesson learned seems to have been that one can improve one's attitude about oneself by living up to known potentials and expectations. So too, by taking responsibility for feelings one admits that they have to be consciously dealt with. This is again part of the reality factor that things don't get better by simply wishing.

I must start to deal with my feelings about myself now. I don't feel good about myself in relation to my job, girls and getting out and doing social things. I'm not happy with all my relationships in the house and outside of the house.

In reference to work, however, this insight is still theoretical as the old pattern of defensiveness and hurt in the face of criticism can still be traced. Just previous to the writing of his evaluation Danny's employer brought several shortcomings to his attention. The fantasy principle that goodness is a matter of intent and that anything that shatters a dream is bad is reflected in the following.

Work hasn't been all that good lately. I don't feel as confident in myself as far as work goes. [He] is taking on so much work for the time we have to do it that it's almost impossible to get it done. I feel really uncomfortable at work lately. It just doesn't feel right there. Since [he] talked to me that time, I just don't know how to put it in words but it's getting worse and I really don't know what to do about it.

Further on, however, he indicates that he does really know what to do. He also is coming to see that self-image must have deeper roots than immediate feelings.

The greatest improvement is that I'm starting to really seriously deal with my feelings about myself and the things that affect the way I feel about myself.

And for the first time in his specific goals he touches upon concrete ways of meeting more general objectives.

My specific goals are: to keep my dental appointments, to plan my free time and to get into social activities.

A month later in his final self-evaluation before leaving residency he seems to come to a personal understanding of some basic principles of change. There is a reciprocal function between behavior and attitude.

I feel my participation in Project activities has improved by a change in attitude.

Behavioral responsibility means accepting the consequences for decisions freely made.

I feel I show leadership now by realizing that it is time for me to leave residence, I'm making the decision and following it through.

Feedback from others is essential as a reality check on personal perceptions.

I feel more aware of how to handle authority now. I feel my ability to accept criticism has improved greatly since my last evaluation. I thought about it and decided if I don't accept criticism how am I going to grow within myself to become a better person.

Feelings must be acknowledged and dealt with.

I guess the biggest improvement in me has been taking responsibility for my feelings.

The Closure Report on Danny confirmed his commitment to change and growth in acceptance of negative feedback. He learned how to exercise authority and grew in self-confidence and trust in others. It was also noted, however, that his ability to establish worthwhile and constructive friendships required continued work, and that in the area of relationships and confidence with girls, he must get his teeth fixed.

Unfortunately, after leaving the project he focused his economic resources on stereo equipment and records and neglected his need for dental work. Satisfying relationships were not forthcoming and so, prompted by loneliness, he joined in with some false friends which resulted in a jail sentence and forfeiture of parole. From initial bitterness and demand for Project support he quickly came to accept his situation as a consequence of his own doing and proceeded to make the best of it. After spending three days with the Project on a pass from jail he wrote the following reflections.

Hi! Well I have been doing some thinking since my pass. On how I felt on my pass and coming back to Project for three days, I was really happy to be in Project again. It's hard to explain the feeling. All I know for sure is that the Project, what it stands for, what it can do if you give it a chance is really in my heart. I'd like to share with you my feelings about Project as they stand today. When I was a resident, I liked what it did for my feelings inside. It helped me to feel whole as a person. I knew I was always trying to better myself, and help other

people to get there too. Always trying to carry out my commitment I made when coming to Project. I like the people in Project, they are special. I don't know any other people outside of Project who try so hard together; to find happiness; to help each other achieve goals; sit together in group sharing every kind of feeling there is to share, so they can live in harmony with their inner feeling, and each other; doing things together.

After leaving Project and ending back here [jail], I have really searched to find the reason why I put myself back here. It's stupidity to come back here. But I am here and it's done. I know the reason why I am back here. It's simply because I went back to my old behaviour. And that's what's stupid. And I want to share with you my feelings now about how it feels to leave residence on your own. Fourth Phase to me is the most important phase of the whole program I feel. It can be a happy stage, or an unhappy stage. Depending on how you look at it. First of all, I want you to know that I place Project separate from society in this way. Project is like a Society within a society. What I mean by this is; whatever society stands for now I feel is screwed in so many ways. Whereas the Project stands firm within itself. These are my feelings about leaving the house. I find it hard to find logic in moving from a happy living situation. I find it really hard to find logic in knowing the happiness I felt in Project; working so hard to get to where I was before I left; then walking out that door. To what? The people on the street? They haven't grown in the same way I have. You feel sometimes like hollering in the streets about Project. But you don't because people don't know what you're talking about. The point I want to share with you is this, I feel that when the situation comes around again, that I'll be able to come back to Project regular again. I want to stick close to the Project like (he) is doing right now. I don't feel being a resident again is important. I feel it would be rather selfish to go through the program again when somebody else probably needs it a lot more urgently than I do. I don't want to break away from Project for all the world. Because like I said before Project is really in my heart.

For Danny the process from knowing to doing has been slow and painful, yet, it has occurred. Attitudes and behaviour go hand in hand and must be congruent. What he has learned through experience and accepted theoretically he must put into practice with consistency if old behavioral patterns are to be replaced by new.

Mary

Mary is the elder of two daughters in an average middle class home. Her parents, especially her mother, took a somewhat permissive attitude and few limits were held to, for the children. Mary had been skipping school for years and finally dropped out at the beginning of high school. This period was the culmination of a history of drug abuse extending from marijuana to heroin. She had been in detention, and nearly died of an overdose on three occasions. Mary is an intelligent person and a perfectionist by nature who can readily see the discrepancy between her high, often unreal, expectations of herself and her behavior. She lacked any sense of self-esteem and had no meaningful friendships. Life on the street taught her how to adopt a tough demeanor and a hardness that effectively covered a very sensitive, gentle and affectionate interior. After spending seven months in a psychiatric hospital she was accepted into residency. She was sixteen. Her determination to change was evident from the first day she came to the house, and is probably the quality that carried her through the ups and downs of the process she began on that day. After successfully completing one semester of school at the hospital she transferred to a large city high school but dropped out after two months and began a very unfulfilling yet important work experience. She completed the program at Project 72 after a year in residency.

The process of behavioral change had really begun during her time in hospital when she decided to catch up on her missed years of schooling. While going to school there from the Project, her attendance

remained constant which was quite a pattern change. As she wrote in her first self-evaluation.

I've only missed one day of school since I came to the Project and I feel good about this because I think I would have missed a lot more if I'd been anywhere else. I have a better attitude towards school, I like it now, I try harder to work in school time and I'm seriously interested in getting my matric. Although my marks aren't as good as they should be, I think that once I'm used to doing things in a definite time period, I can put a little more work into this area.

Mary was always quite aware of herself even though most often confused about why she behaved as she did. She also was able to name her game.

I'm very self-conscious and I usually think that I'm not okay no matter what I try to do. Sometimes I see myself as being intelligent, sensitive, easy going, friendly, warm and loving. This is part of me that I don't like people to know about and as a result I find it very difficult to express my real self around other people. I like people to think I'm just the opposite because then I can't get hurt as easily and I don't have any expectations to live up to. I feel a lot emotionally but when it comes to expressing it I wouldn't know where to start. A lot of times when I want to say something to someone I usually end up saying opposite of what I wanted to. In the past few years I've built up a lot of defenses which are going to take a long time to break down.

Her specific goals outlined the main areas that were to be focal during the next year.

I want to try to get over my fear of big schools and also work harder in school. I want to become more honest with myself so that I can become more open and honest with other people. I want to work on my personal relations and get feedback on how I come across to other people.

By the time of writing her second phase evaluation some two months later, she had completed her semester at the hospital school and was to continue her next semester in a large city school. She had come to feel secure and the thought of changing to an unfamiliar setting was a frightening prospect.

I'm happy to be leaving the hospital but I'm really going to miss the people out there. I guess I can really see that going to [that school] is going to open a lot of new doors for me. I'm really enthusiastic about it but still quite frightened.

Her concept of leadership broadened and she came to see it in the light of credibility. That is, leadership involves consistency.

My idea of a leader is someone who acts responsibly, sets a good example for other people and isn't afraid to admit his mistakes. In my last evaluation I felt that getting up every morning for school could be considered a leadership quality. This isn't happening anymore so I feel that I've lost my leadership qualities in this area. However, I feel that I can see myself as a leader in one other area now. In group on Thursday nights I feel that I've shown leadership by trying to deal with my feelings in an earnest, honest manner and by taking responsibility for the way I feel.

Her self-awareness reflects a growth of confidence in self and trust in others. There is now a willingness to take the risk of sharing more deeply. Again, however, the old pattern of staying with what is familiar and secure, for fear of what is unfamiliar, shows itself.

One big change I've noticed is that I'm much more confident in myself now. I can see what I'm capable of a lot better and I'm not scared to read this one. Although my confidence is growing I'm still not as sure of myself as I'd like to be. Another thing that has really changed is that I can be hurt quite easily now. I've noticed this especially in my sarcastic remarks when someone says something about me or anything for that matter. It seems like I'm constantly protecting myself from attacks that are non-existent or trying to shut people out. Now that my silence doesn't protect me anymore I guess I've had to find something else. I take things personally when people are joking without even thinking that they might not be serious. I've been very restless lately too. I feel like running away from myself before I find out things about me that I might not want to. I'm starting to worry more about dumb things too. I guess I always did this but I'm just beginning to see the extent to which I do this. It really bothers me because it makes me uptight all the time. One change I'm really happy about is that I've started talking a lot more about the things that bother me. Whenever something is on my mind now it's a lot easier to bring it up. I find it easier to relate to other people but I don't know if this would be true outside the house. I've been really avoiding going out and seeing people who aren't from the Project. All in all, I'd

say I'm starting to like myself a lot better now. I'm not really too sure how others see me. I guess people see me as an okay person in general. From the feedback I've been given I've noticed a few things that others see in me. These are that I'm a person they'd like to get to know; someone who is caring, determined, reliable, reasonably intelligent and someone whose worst critic is herself. In the future, I'd like to see people telling me what they like and don't like about me a lot more. This may sound funny but I want to feel uncomfortable, to feel hurt and to learn how to deal with it. I know a lot of this has got to be on my part but I'd like everyone to help me.

Two months later, Mary was into a slump. School had again become an overwhelming experience and so she decided to quit.

I don't want to be talked out of my decision. What I'm asking is a lot of support because I feel that this is going to be very difficult for me. I'm sure that I'm doing the right thing and I'm willing to face the consequences. In the future I hope to withdraw myself from school and get a job.

It was later learned that at the time she was on the verge of being expelled because of absenteeism. The reciprocal interaction of behavior and attitude was also clearly evident during this time.

Mary was not doing what she knew she was capable of and so had to project the blame elsewhere.

In the last month or even longer my general attitude towards the Project hasn't been very good. I haven't been living out my commitment very well. This is mostly in the area of school but there are other things as well. I've been going through a period of feeling very critical of the Project and what it is all about. This even went so far that I was going to leave because I didn't think the Project could do anything more for me. I cut down everything that was happening in Project and felt really disgusted with the whole thing.

The behavioral component of the above feeling can be seen by her own assessment of the situation.

My participation in Project has gone down the drain in the last month or so. I've been letting things drag a lot instead of getting them done when they should be. Examples of this are my house job and not getting a seminar report done on time. My

participation in Group has deteriorated to the point where I don't even like being in Group anymore. I have to be pushed to talk about myself and I don't take the interest I used to in others. This makes me feel like a real bitch and it does nothing to add to my growth.

Yet, Mary's self-awareness was becoming increasingly more profound and realistic, striking a good balance between positive and negative elements.

I feel that I am much more aware of who I am than I've ever been before. I see myself as someone who has a lot of potential to do good things with myself. I am intelligent enough to learn a lot of things and be able to see a lot of things. I am a strong person and at times this can work to my disadvantage as well as to my advantage. I can be a warm and loving person but at other times, I can be just as much of a cold, hard person. I am someone who needs a lot of love, a sense of security and a feeling of importance. When I don't feel I have these things I stop growing and I lose my sense of purpose. Whenever I feel I can be really hurt or that my stability is threatened I withdraw. This is something I have to do a lot of work on because usually when I push people away it's because I'm getting my messages scrambled; I feel that I'm reasonably perceptive but a lot of times I take the things I see the wrong way. I feel I've finally managed to work through the whole drug thing since I've been here. Before I used to be tempted a lot of the time but now I just do whatever has to be done. I still have a lot of growing to do in this area though. I have a great capacity of turning into a monster when my foundations are shaking. I can be a very free and happy person at times. I like to be this way because it's catchy and other people start feeling good. I feel that I can make people feel this way because it makes me feel good inside to see other people happy.

Two months later Mary moved into the third phase. Working was not a solution to going to school yet she stuck with the consequences of her decision. She began to realize that self-discipline was the real issue that she was dealing with.

I regret very much the decision I made to quit school but at the same time I don't think that I would have lasted very long anyway....It's quite hard for me to do things like this [stick to a job] for myself when I've never had to before. This is one thing which I feel I'm going to have a hard time learning to do. I don't like working at the car wash but I feel secure being there and knowing I don't have to go looking for a job. I'm pretty disappointed with myself over the whole work thing but I'm sort of waiting till I want to change this.

In reference to the Project she could not identify the dynamics behind some of her feelings.

When I feel insecure I tend to cut down the Project.

And as for herself she was now more aware of the demands of being "okay".

I feel quite good about myself generally but at times it really scares me that I'm doing okay. One of my biggest faults is that I take everything too seriously. It was very idfficult for me to let myself go and enjoy things. I'm constantly worrying about what I'm doing and not doing. I guess I've really got to learn how to play.

In her final evaluation three months later Mary sees herself and her behavior in a much more realistic way and takes concrete steps to tackle inconsistencies. The experience of working had helped things into a clearer perspective.

My work performance is an area in which I haven't been doing too good. Sleeping in is my biggest problem, but since my contract was brought up again I haven't slept in. I've also been going to bed on time so that I can get enough sleep. I'm bored with cooking and cleaning and all I really want to do is to go back to school....I've never had to work before and it has really taught me to appreciate money a lot more. I'm also more aware of the fact that I will really have to choose a career that I enjoy working at because I can't simply pretend I like doing something....As far as school goes everything is all set up for me to go back to school. The fact that I had to really sell myself would have made me forget trying four months ago, and I'm happy that I did it on my own too.

So too, she can come to understand the root of some of her behavior and takes appropriate steps to change.

I'm really terrified of going to places I haven't been because I'm tossed into something I'm not familiar with. I do my best to get out of going to the point of conning myself. I think part of my fear of going to school is along this line too. I told [him] that I'd go on the weekend to Nordegg with the Learner Center if my board request was passed. Now I'm absolutely terrified because I don't know the people, the place or have any clues as to what we'll be doing. I don't think I'll have a way out of this one either.

For Mary the process of change was gradual, much more of an evolution

than a revolution. Only by hindsight did it become clear and evident.

I feel that most of the things I have done are now so much a part of me that it feels like they were always there or else not important enough to talk about. The most obvious change in me is that I don't get stoned every night now. That isn't the most important though. The self-confidence I have gained and the ability to relate more freely with people is what I value the most. I know I still have a long way to go but with a lot of support I hope to be able to get there. I feel I have gained a much deeper understanding of other people too. In a lot of ways I'm still really unsure of myself. I find it hard to believe that people care about me and a lot of times I feel very unimportant. Generally though I do feel good about myself but I can only feel this way when I'm doing the things I've committed myself to do.

In reflecting on her original objectives Mary could see how far she had come and so plan to go further.

When I came to Project the most important commitments I made to myself were to quit using drugs and to learn how to relate to people differently than I had been. I feel that I have accomplished these two things but that I still have a lot of work to do. Also, I know that if I can keep relating to people on the levels I would like to, I won't have any use for drugs.

Mary's closure report describes her as follows:

Mary's attitude of strong determination has carried her through some of the most amazing changes. She is a strongly disciplined person whose high standards demand courage and perseverance. Mary has constantly and consistently applied herself to changing her life and becoming a free, responsible and independent person in close relationship with people. Her relations with residents are honest, demanding, affectionate and supportive. No one has ever won the respect and confidence that Mary has. She had demanded the best of herself and those around her. She has shown a tremendous growth in self-confidence; and outstanding capacity for dynamic leadership; an increase in responsibility; and added awareness of others; a growth in the "spiritual" dimension; a deep level of commitment; and added ability to take risks, an ability to make and follow through on decisions.

As a postscript it should be added that after leaving the house Mary did go back to school and at the time of writing, is missing only three courses for senior matriculation.

Marlene

For a third case study I have chosen that of Marlene, twenty-seven years old and the mother of two. She has participated in the non-resident program. Her family background was somewhat unusual and definitely unhappy. The youngest of four girls, (seventeen years between her and her next sister), she was smothered with protection by her mother and openly rejected and humiliated by her father. In early childhood her oldest sister moved in with them bringing her son who was six month's Marlene's elder. Her father always wanted a boy and was disappointed in Marlene. This just made things obvious.

[He] was the apple of Dad's eye and I got pushed away. I recall clearly how painful and confusing this was for me. Suddenly, I felt like an outsider in my own home.

Marlene's mother was in and out of hospital, at which times Marlene was shipped off to live with her sister. School was always a frightening experience. By early adolescence her mother had become more sickly, and open hostility broke out between Marlene and her father. At the beginning of high school she was diagnosed as a petit mal epileptic and suffered frequent seizures. She attempted suicide at this time and dropped out of school.

I had no confidence in myself at all. The only thing I knew for sure that I could do was fail. I had no friends and home was so bad that I was seldom there.

Her work record was sporadic and unstable. In her late teens she became pregnant, was abandoned and due to family pressure moved to another city. At this time her father died. She became a day patient at a psychiatric unit, again became pregnant and lost the baby. Shortly after, she became pregnant again and bore her second child but family

pressure on the father's side prohibited marriage. It was not too long, however, before she did get married to a man nearly twice her age. They lived together only four months when his drinking and abusiveness made it imperative that they separate. The following two years were even more disintegrating. After overdosing, Marlene spent three weeks in hospital and her children were placed in foster homes. On discharge another man moved in but after five months, his drinking and abusive behavior made that situation intolerable. She again overdosed and this time spent three and a half months in hospital. The children again were placed in separate foster homes. Two days after being discharged from hospital her mother suddenly died. This for Marlene was a shattering blow. She got her children back and took the man she had been living with, back. This lasted for six months before it required police intervention to get him out again. Two months later Marlene began coming to Project.

Her nervousness, tenseness and lack of self-confidence were painfully evident, yet there was also a visible determination to put an end to a most unproductive pattern of life. After the required three week probation period, Marlene was faced with a terrifying option - to stand before the group and apply to be a non-resident, or to leave. Sheer determination as well as the physical support of the people around her made her application possible. From then on it was a matter of continuous growth.

Remember when I first came to Project, how frightened I was of speaking to people? It was an ordeal for me to talk to people; to one person, never mind to stand here and lay myself wide open to a group of people. I remember standing up to speak for [him] [referring to the custom of commenting on another's evaluation]. I was so scared I think my teeth rattled and I couldn't look at

anyone. I'm still nervous but I'm excited at what I can do now, compared to what I could do before. Most of the credit belongs to the Lord for that. I smoked for nearly fourteen years and tried everything to quit and failed. I gave in to the Lord and now even my desire is gone. My nerves are better than they have been in years. I have quit biting my nails and now have hands that I don't have to sit on. So I have grown a lot, and even though I have a long way to go, I'm pleased with how far I've come.

She is also learning to understand the roots of some of her feelings and behaviors.

I'm aware that many times I set impossibly high standards for myself. I'm learning to like me the person without necessarily liking all the things I say or do. I'm learning that I can be two people -- one nice as pie and the other hellishly miserable. My emotions are very near the surface and frequently override me completely.

It is interesting to note that she invited her fiancée to hear her evaluation. They are planning their wedding shortly. Her specific goals reflect this event.

I want to work on my personal growth so that I will always be a help to him [her fiancée] and so he will always be proud of me. Secondly, I want to be a good mother to my kids and for this I need more patience. My long range goals include going back to school someday to upgrade myself. After that, well, I would like to work with handicapped children. But these goals may be far in the future and they may also change in time. Right now I'll be happy looking after my home and family.

Whether the changes in Marlene and the lessons learned have been profound or superficial only time can tell. Yet, one thing is certain, she has now experienced success and that will leave a lasting mark.

CHAPTER IV

General Observations and Issues

By way of conclusion, I shall now turn attention to four areas of concern which arise out of my experience in Project 72. Hopefully, these will raise issues which may provide direction for future study and research.

Evaluation

One of the most pressing concerns for Project 72 is that of evaluation. Theoretically, evaluation can be understood as an orderly examination of a system to test consistency between goals, objectives and program design; to examine the effectiveness of administration and work roles; and to verify the treatment process through follow up and case studies. Following the scheme presented (Figure 1, page 11) for program evaluation, it is the purpose of ongoing evaluation to identify and suggest correctives for slippage. Slippage refers to a lack of logical coherence and consistency, or actual discrepancy between the various levels within a system. This is identified when there is an evident inconsistency either in the theory itself or between theory and practice. Evaluation therefore, I see under three aspects: structure, process and product.

Structural evaluation focuses on organizational structures in order to assess the effectiveness of administrative support systems and work roles in facilitating delivery of intended programs. Process evaluation focuses on program design to test the consistency of theoretical, treatment assumptions and concrete treatment methodology.

Likewise, it must assess the effectiveness of lines of communication for decision making among those involved in the delivery of the program. Both the validity of the theoretical framework and of treatment procedures must be tested. Product evaluation focuses on outcomes and is necessary to verify overall effectiveness of structure and process in bringing about intended results.

Our experience however has shown that in practice evaluation becomes a major issue because of its common association with some kind of judgemental process. Program administrators and directors often fear an unfavourable outcome from external evaluation or are skeptical of the instruments that are used. What are the criteria for measuring behavioural change? How does one gather hard data? What are the standards for program comparisons? While generally accepted as a need and demanded for credibility, program evaluation is still very controversial and at times suspect. I think that a good deal of research is still necessary both to change attitudes and to develop more reliable tools for effective evaluation procedures. The product of evaluation is not a judgement of good and bad but rather an identification of degree of congruency between stated intent and factual evidence. The general purpose of evaluation is improvement not condemnation.

The Program as an Example of a Self-Monitored Reinforcement System

In order better to understand why our particular program design seems to work I would now examine it in reference to some general principles of reinforcement.

The program of Project 72 is uniquely designed around a self-monitored reinforcement system to promote behavioural change. In reading

through the chapter on "Positive Control" in Bandura's book Principles of Behavioral Modification, I was quite struck by the Project's practical application of many of his theoretical principles.

Reinforcement as singular events or as a comprehensive system can be examined under three aspects: the incentive or motivational factor, the contingency or association factor and the response induction factor. Project 72, applies these principles of reinforcement in a systematic way.

It is generally accepted that the starting point for any behavioral change is motivation. Unless a person has at least the desire to change some elements in the behavioral patterns that make up his particular life style no planned behavioral change will occur. For this reason admission to the Project is made contingent on application not placement. A time is provided for the individual to observe and experience the program before a decision is made. Admission is made through a mutual commitment between the applicant and the members of the house who vote on his acceptability. If accepted, the new resident is expected to live up to the requirements of the program and is largely left on his own to do so. In order to help him make initial changes and become more integrated into the house he is asked to cut off all past contacts, (family, friends and places). Thus, by altering external conditions he is given the opportunity to assess the value of these contacts so as to later develop those that he feels are beneficial.

The contingency factor in the Project's framework is achieved largely through internal control. Right from the beginning behavioral change is based on the personal selection of behavioral objectives and specific goals. One condition for residency is that the individual be

attending school or going to work, and so for many, accomplishment of this prerequisite is in itself a significant behaviour change. Self-perception of progress is gained by periodically writing Self-evaluations in which the individual is given a guide to help examine perceived changes in specific areas of his life, as well as to outline specific goals to be worked on in the immediate future. Usually these goals are further concretized by the group who may ask the individual to make a contract to indicate what he wants to do and when he is going to do it. A reality check on progress is also provided by what is called the Weekly Rotational. At this group meeting each member rates himself on a one to five scale as to his performance in given areas of activity and then is rated by the other members of the group. This provides both a subjective and an external check on how one is progressing. The reinforcing value of perceived change is extremely important and so it is necessary to encourage much positive feedback among residents. External secondary reinforcers, (attention, approval, distinction), are provided graphically on the operations board where names, phase status and comments on work performance are noted.

The third essential factor for effective reinforcement is the response induction factor. In other words, methods must be devised for producing a certain frequency of responses that can be reinforced. While verbal reminders are used in the Project, especially at initial stages, by far the most effective element is that of modelling. The entire Phase System is devised to provide, in the persons of the other residents, living examples that progress can be made. Progress through the Project is always left to the discretion of the individual. He is

never forced to do anything but constantly reminded of the commitment he made to do something for himself.

Mediational Process in Attitude Change

From the case studies presented earlier we can see typical illustrations of the kind of behavioral and attitudinal changes that occur within an individual over a period of time in the Project. But what are the inner dynamics of this process? For me, a plausible explanation of this phenomenon lies in the area of symbolic, mediation influences on attitudinal change.

I believe that behavior and attitude have a reciprocal function. In other words, a change in one will have a direct influence on the other.

According to consistency theory based on various formulations of cognitive consistency -- congruity (Osgood and Tennenbaum, 1955), balance (Abelson and Rosenberg, 1958; Heider 1958), cognitive dissonance (Festinger 1957), the human organism experiences a certain innate need to maintain consistency among beliefs, feelings and actions.⁷ This assumes that a person's cognitions regarding self and environment are organized into an internally consistent system and that one strives to maintain this established state of consistency between cognitive and behavioral patterns.

Thus it can be concluded that any change in any area is at once a consequent and causal variable in reference to the others, and so, on this hypothesis one could experiment to discover to what degree changes in cognitive, effective or motor classes of behavior have reciprocal effects. Studies have shown that changes in attitude produced by persuasive communication generally have little or no effect upon our

actions (Fleishmann, Harris and Burt 1955; Levitt, 1965; Macoby, Roney, Adams and Macoby, 1962).⁸ However, unlike the inconsistent results of persuasive communications, modelling approaches have proven capable of producing correlated changes in behavior and attitudes (Dunker 1938; Bandura, Blanchard and Ritter, 1969).⁹ In reference then, to attitudinal change three approaches or strategies are possible:

- a belief-orientated approach, utilizing information and persuasive communication.
- an affect-orientated approach aiming at altering the affective properties or valances of objects through conditioning, countercondition or modelling techniques,
- a behaviour-orientated approach which assumes that modifications in concrete behavioral patterns will have affective consequences -- attitudinal change.

Project 72 opts for this final approach and so takes behavior as the mode for attitudinal change. As a rationale for this approach three reasons are put forward. First of all, it is easier to arrange reinforcement contingencies for overt actions than for changing personal convictions which are more difficult to isolate. Secondly, attitudes are more easily recognized and identified in relation to concrete events. Thus for example, one may change one's opinion regarding segregation of a particular group in a discussion context and yet re-experience the effects of a negative attitude when in the presence of a member of that group. Thirdly, behaviors are maintained by immediate, concrete consequences which are more powerful than cognitive modifications. St. illustrates this point: "I do not understand what I do;

for I do not do what I like to do, but instead do what I hate."

(Romans 7:15) In other words, we often experience a marked discrepancy between what we know and what we do.

The methodology used in a behaviorally orientated approach to attitude change is to get the person to engage in attitude-discrepant behavior under conditions of minimal external inducement. Thus the less compelling the external reasons for contradictory behavior, the greater the internal dissonance and so the greater the attitude change required to reduce it. The person then, is interiorly compelled to attach new valences to contradictory activity to justify voluntary performance of an inconsistent action. Different explanations are given to help identify the mediating processes involved in this type of attitudinal change. According to the dissonance theory, inconsistent action produces most effective attitude change to the degree that the action is voluntarily done. Thus the following optimum conditions should prevail:

- small external incentive or justification
- minimal threat or coercion
- perception of a high degree of choice
- high expenditure of effort in attainment of inconsistent goal or enactment of discrepant behavior
- high sense of self-esteem
- inducing agent viewed at least neutrally (so that no blame or excuse can be passed on to someone else).

The self-persuasive consequences of recalling and developing positive arguments and reasons for actions has a reinforcing effect on

maintenance of different behaviors and attitudes. This becomes very evident when residents are asked to go out on speaking engagements on behalf of the Project. External positive reinforcement is also at work where social approval for certain behavioral responses is expressed either directly or vicariously through a model, (the basis of the Phase System).

In summary then, attitude formation and change are direct results of symbolic, mediational processes which seem to be most effectively controlled through behavior orientated techniques. Project 72 employs such techniques.

Development of Co-Leaders in Group Counselling

Since its inception, Project 72 has relied heavily on the collaboration of lay volunteers, especially in group work. In the early days of the Project, the number of groups held on Thursday Night were limited to two so as to count on the presence in each of trained personnel. Thursday Night Group which is the focal point of the non-resident program has grown constantly until at present forty to fifty people attend. This growth in numbers necessitated a multiplication of groups and so the development of more group leaders. At first, the more experienced leaders simply chose someone from their group to work with so as to prime him or her for a group leadership role. These trainees did not feel comfortable being left alone with the responsibility for a group, but were more comfortable when sharing responsibility with another. This pairing or co-leader procedure was also helpful in breaking down the idea of one person being responsible for what

happened or, often more disturbing, what did not happen in Group. The co-leader concept made it feasible to incorporate, being a participant (for which reason most were coming to group) with being an observer (in keeping with group leadership function). Co-leadership allows for participation by all members as well as an observational component to provide feedback to individuals on the actual dynamics of the interaction. The teamwork then of co-leaders revolves around the coordination between them of participation-observation functions.

Another unforeseen advantage of the system is what might be termed the modelling effect. Because of the fact that a well functioning co-leader team are relatively indistinguishable from others in the group, skills exemplified by them are readily picked up and employed by other group members. This process then has an inherent value of improving the interpersonal functioning of the group as well as providing basic training for more co-leaders.

The basic criteria for selection of co-leaders is on the quality and quantity of group participation and experience. We also attempt to establish an equal male-female ratio so that teams are heterosexual. During the initial stages of the Project training was based largely on a master-novice model with the more experienced or trained leader working closely with the novice in developing interpersonal and group leadership skills. This was done mainly at the pre and post group sessions held before and after the main Thursday Night Group activity.

Before Group, leaders get together to establish the division of participants and often discuss and practice some particular skill. Likewise, after Group, the co-leaders again meet to relate their

observations of group dynamics and to give feed-back to one another regarding their performance. The period before Group, however, is somewhat inopportune for effective training because of a lack of time and emotional pre-game tension. For this reason, weekend workshops have been organized which provide a large part of the educational component for co-leader development. On these occasions basic skills are examined and practised and a certain esprit de corps established. Feedback from participants indicates a noticeable increase in personal feelings of confidence and comfort with the co-leader role in a group situation. It is hoped that on-going training programs will be established to provide graduated educational input for both new and more experienced co-leaders who hopefully will employ their skills in more everyday, interpersonal, life situations. It is then, in this way that we hope to help populate the community with more persons who are alive and growing and who can facilitate better life choices among those with whom they are in contact.

Conclusions

From the foregoing discussions specific points arise which could easily provide material for further study and research within the context of Project 72. Evaluation procedures should be established to test the validity of program objectives in reference to stated goals. So too, methods are needed to test the validity of program design in reference to stated objectives. More work needs to be done in the preparation and revision of data gathering forms and procedures. There is sizeable quantity of data already collected which requires coding and

analysis. Follow-up studies are still at an infancy stage within the Project.

The reciprocal function of behavior and attitude in personal change could certainly be examined further in reference to the program design employed in the Project. Ongoing programs for staff development should be prepared for residential staff and volunteer co-leaders. Only minimal beginnings have been made to assess the influence of such factors as composition and leadership styles in the dynamics of Thursday Group.

Due to the nature of its basic goals, Project 72 must constantly develop and grow if it is adequately to meet the needs of those it proposes to serve. Such a continuous evolution requires the active co-operation of staff, residents, non-residents, trained professionals and concerned members of the community at large. It is because of such co-operation that we have arrived where we are today and it is my hope that the future will provide continuing development.

FOOTNOTES

1. Adapted from the statement of purpose of the Manhattan Project for use in Project 72. This "purpose" is read as an introduction to every Thursday Night Group meeting.
2. These statistics have been compiled to cover the period from September 7, 1972 through March 31, 1975 which coincides with the experimental period funded by the Non-Medical Use of Drugs Directorate of the Department of National Health and Welfare.
3. Adapted from a table compiled by Allan Y. Cohen in his article The Journey Beyond Trips : Alternative to Drugs
4. A more unstructured format for Tuesday's meeting follows a "focus" pattern. Residents volunteer to focus on issues or concerns about themselves, and different techniques are used to help in clarification.
5. The ordering here is based on the skema presented in Table 1, page 13.
6. It will be noted that positions are denoted by the plural form since the Project is by nature multiple and so ideally exists when several residences are operating simultaneously in a given area. This aspect, too, is patterned on the Manhattan model which sees the total Project as the composite of semi-autonomous residences.
7. References are found in Bandura's book, Principles of Behavioral Modification, page 607.
8. References are found in Bandura's book, Principles of Behavioral Modification, page 595.
9. References are found in Bandura's book, Principles of Behavioral Modification, page 604.

SELECTED REFERENCES

- Babou, I. The Treatment Monopoly In Alcoholism and Drug Dependence: A Sociological Critique, Journal of Drug Issues, Spring 1975, 5(2), 120 - 128.
- Bandura, A. Principles of Behavioral Modification. New York: Holt, Rinehart and Winston, 1969.
- Bassin, A. Reality Therapy at Daytop Village, Journal of Drug Issues, Fall, 1974, 4(4), 381 - 392.
- Berntsen, K. Treatment of the Young Drug-Addict: A Nontraditional Approach, Journal of Drug Issues, Winter 1975, 5(1), 48 - 53.
- Carkhuff, R. R. Helping and Human Relations. New York: Holt, Rinehard and Winston, Volume 1, 1969.
- Cohen, A. Y. The Journey Beyond Trips: Alternatives to Drugs. The Alberta Alcoholism and Drug Abuse Commission, (Reprint 72 - 77).
- DeLeon, G. Behavioral Science in the Therapeutic Community: Some Old Issues Revisited, Journal of Drug Issues, Fall, 1974, 4(4), 435 - 442.
- Densen-Gerber, J. Odyssey House: A Structural Model for the Successful Employment and Re-Entry of the Ex-Drug User, Journal of Drug Issues, Fall, 1974 4(4), 414 - 427.
- Directory of Community Services of Edmonton and District, Winter 1973, prepared by A.I.D. Service of Edmonton.
- Freudenburger, H. J. How We Can Right What's Wrong with our Therapeutic Communities, Journal of Drug Issues, Fall 1974, 4(4), 381 - 392.
- Gilbert, L. Treating the Drug Abuser: The Next Step in the Process, Journal of Drug Issues, Spring 1975, 5(2), 167 - 176.
- Glasser, W. Reality Therapy, New York: Harper and Row, 1965.
- Kiley, D., & Huberty D. J. The Community as a Therapeutic Milieu, Journal of Drug Issues, Spring 1975, 5(2), 152 - 159.
- Laurence, F. An Ex-Offender, Evaluates Correctional Programming for Women, Criminal Justice and Behavior, An International Journal of Correctional Psychology, March 1975, 2(1), 388 - 391.
- Londau, S. F. Future Time Perspective of Delinquents and Non-Delinquents: The Effect of Institutionalization, Criminal Justice and Behavior, An International Journal of Correctional Psychology, March 1975, 2(1) 22 - 36.

- Lopez-Rey, M. Drug Addiction as a Sociopolitical Problem, Journal of Drug Issues, Winter 1975, 5(1), 1 - 11.
- McLuckie, B. J., Zahn, M., & Wilson, R.A. Religious Correlates of Teenage Drug Use, Journal of Drug Issues, Spring 1975, 5(2), 129 - 139.
- Melotte, C. J. & Ogborne, A. C. Strategies For the Successful Follow-up of Treated Drug Users, Journal of Drug Issues, Winter 1975, 5 (1), 79 - 82
- Rachman, A. W., & Heller, M. E. Anti-Therapeutic Factors in Therapeutic Communities for Drug Rehabilitation, Journal of Drug Issues, Fall, 1974, 4(4), 393 - 403.
- Slack, E. N. Remedies for Wrong, Criminal Justice and Behavior, An International Journal of Correctional Psychology, March 1975, 2 (1), 381 - 387.
- Smeltzer, F. M. & Riggs, D. E. Overview of The Drug Scene in Edmonton Public System High Schools - Fall Term 1969 - 70, Edmonton Public School Board, December 1969.
- Steinfeld, G. J. Perceived Curative Factors in Group Therapy by Residents of a Therapeutic Community, Criminal Justice and Behavior, An International Journal of Correctional Psychology, September 1975 1(3), 278 - 288.
- Toffler, A. Future Shock. New York: Random House, 1970.
- Trust Report (July 9, 1970 - October 30, 1970), Unpublished Private Manuscript.
- Unwin, J. Illicit Drug Use Among Canadian Youth, The Canadian Medical Association Journal, 1968, 98, 402 - 407; 449 - 454.
- White, R. W. Lives in Progress (2nd ed.) New York: Holt, Rinehard and Winston, 1966.

APPENDIX IVOLUME STATISTICS

PROJECT '72 - Volume Statistics - September 1, 1972 - March 31, 1975

1. Referral Sources

Private	24
Alberta Hospital	33
Community Services unit	9
Misericordia Hospital	13
University Hospital	3
Aberhardt Hospital	4
Doctors	3
Adult Probation	13
National Parole	6
Bowden	4
Fort Saskatchewan	7
Belmont Day Parole	1
Edmonton Detention Centre	1
Youth Development Centre	3
Lawyers	2
AADAC (Out Patient Clinic)	11
Intoxication Recovery Centre	3
Henwood	5
Methadone Clinic	1
Catholic Family Counselling Ser.	5
Chimo	4
Point Three (Casa)	2
Marion Centre	1
Salvation Army	1
Guidance Clinic	1
Poundmaker	2
Boy's Club	1
Mapleridge	2
HELP	3
General Hospital	3
Comm. Health Services (RED Deer)	1
Dept. Health & Social Development	6
City Social Services	7
Jasper Place Comm. Centre	1
Grant MacEwan	1
School Counsellors	5
Clergymen	8
Judges	7
Life Skills	1
Glenrose Hospital	1
Total	209
Boys -	138
Girls -	71

2. Total Programs

Screenings	209	Boys	138
		Girls	71

VOLUME STATISTICS

- 3 -

d. Synopsis of Residents

Time in Residency	Number	Presently Re- Institutionalized	Presently in Project	Functioning Independently
0 - 1 months	12	2	1	9 (3 re-admissions)
1 - 2 "	7	3	-	4 (1 re-admission)
2 - 3 "	15	2	1	12 (2 re-admissions)
3 - 4 "	5	-	2	3
4 - 5 "	3	-	-	3 (1 re-admission)
5 - 6 "	1	-	-	1
6 - 7 "	3	-	-	3
7 - 8 "	5	-	1	4
8 - 9 "	3	-	-	3
9 - 10 "	1	-	-	1
10 - 11 "	-	-	-	-
11 - 12 "	1	-	-	1
	56	7	5	44 (7 re-admissions)

Number of Resident Days:	Sept. 1/72 - Mar. 31/73	916
	April 1/73 - Jan. 31/74	1843
	April 1/73 - Mar. 31/74	2345
	April 1/74 - Mar. 31/75	2547
	Total	7651

4. Non-Resident Program

a. Breakdown of Non-Residents by age at admission:

Age	16-18	19-20	21-25	26-30	31-35	36-40	Over 40	Total
Male	9	7	9	10	2	4	2	43
Female	11	9	10	4	4	3	7	48
								91

b. Thursday Group Attendance

Residents	798 x 3	= 2394	treatment hours
Non-residents	1997 x 3	= 5991	treatment hours
Guests	1078 x 3	= 3234	treatment hours
	total	11,619	treatment hours

Total Attendance - 4218 people weekly average: 40 people

c. Seminars and Activities Attendance (Monday) Total number of persons = 1,275

VOLUME STATISTICS

- 4 -

5. Miscellaneous

a. Volunteer Hours (accurate records only kept for 1974/75)

	<u>Per Week</u>	<u>x 50</u>	<u>Total</u>
1974 House coverage	12 hours		600 hrs.
1974 Driving	4 hours		200 hours
1974 Thursday group	8 persons x 5 hrs.	x 50	2000 hours
1974 In-service Work-shops	12 persons x 3 times x 45 hrs.		= 1620 hours
1974 Advisory Board Meetings	6 x 3 hours		18 hours

b. Visits out

Government Departments and Agencies	132
Private Agencies & Individuals	90

c. Visits In

Government Departments and Agencies	243
Private Agencies and Individuals	125

APPENDIX 2LIST OF PROGRAM FORMS

<u>Form</u>	<u>Description</u>	<u>Page</u>
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FORM I - RESIDENT ORIENTATION - SUMMARY

RESIDENT ORIENTATION - SUMMARY

	<u>RESPONSIBILITIES</u>	<u>PRIVILEGES</u>
<u>PHASE I</u> Approx. 30 days	<ol style="list-style-type: none"> 1. School/work, house job 2. Participate in full program 3. Cut off contact with past people & places 4. Ask permission for special phone calls 	Optional, out with 2nd phase person Sunday & Wednesday
<u>PHASE II</u> Approx. 60 days	<u>(SELF-EVALUATION)</u> <ol style="list-style-type: none"> 1. School/work, house job 2. Participate in & lead 2nd phase meeting 3. Permission for phone calls 4. Board request for guests during week 5. Assist & lead grocery, laundry, activity tours & seminar 6. 	<ol style="list-style-type: none"> 1. Out alone on Wednesday & Sunday 2. Guests in during week & Sunday 3. Weekend off in residence 4. Answer phone & door when asked to cover house
<u>PHASE III</u> Approx. 90 days	<u>(SELF-EVALUATION)</u> <ol style="list-style-type: none"> 1. School/work, house job 2. Participate & lead in 2nd phase meeting 3. Advise re: phone calls & going out 4. Ask permission for guests during week 5. Lead laundry, grocery & entertainment activities, tours, seminars & groups 6. To be assistant & weekend duty, i.e., conduct rent meetings & make rent deposit 7. Answer phone, door, speaking engagements on behalf of Project 	<ol style="list-style-type: none"> 1. Out Wednesday & Sunday 2. Guests in during week 3. Weekend off IN or OUT of residence 4. Option to attend seminar 5. Observe and vote in Board when invited.
<u>PHASE IV</u>	<u>(SELF-EVALUATION)</u> <ol style="list-style-type: none"> 1. School/work, house job 2. Attend and co-lead Tuesday & Thursday group 3. Cooperate with house re: general cleanup; tours, community supper, etc. 4. Organize and conduct seminars 5. Weekend duty 6. Speaking engagements on behalf of the Project 7. Attend operations Board meeting 8. Help organize special projects events - camping trips, open house, etc. 	<ol style="list-style-type: none"> 1. Option to participate in Project activities 2. Key to house 3. Participate on operations Board

FORM 2 - GUEST ORIENTATION

GUEST ORIENTATION

WELCOME TO PROJECT '72

As a guest, once you have taken a look at what the Project has to offer and wish to continue coming, we would like you to attend Group on Thursday for four consecutive weeks as a guest and are more than welcome and encouraged to attend Seminars and participate in Tours. If during this time you feel you would like to become a Non-Resident, we ask you to share these feelings in your individual group.

On your fourth Thursday, having completed the above and informed the Non-Resident Co-ordinator of your intentions, you will be asked to present to the House your desire to become a Non-Resident, stating your reasons and goals. At this time, Residents and Non-Residents in your group will present you to the larger group, giving their perceptions of you, and others in the larger Group who know you will be given the opportunity to give theirs. A final decision to accept or deny your request is made on the basis of what all these people feel.

So briefly, your responsibilities, if you wish to continue coming will be:

1. Phone Project '72 no later than Wednesday, at 426-5519 and tell the person there that you will be at Project 72 the following Thursday, or sign the "guests repeating" list after group.
2. Seminars and Activities are held Monday evenings (check regarding times).
3. Tours are held on Friday evenings after Rent Meeting, when Residents buy individual and communal groceries and later do their laundry at a local laundromat. (This time provides an excellent opportunity for people to get to know one another.)
4. Entertainment tour is held on Saturday evening and you are asked to inform the tour leader Thursday evening if you plan to attend.

This is only a brief condensation to act as an introduction. If you want further information always feel free to ask any Resident, Non-Resident or Co-ordinator of the Non-Resident Program. There is more written detailed information on the whole Non-Resident Program if you are interested.

Feel free to ask questions -- feel free to make friends -- feel free to stay or not, the choice is yours. And remember our slogan "SHOW ME --DON'T TELL ME".

FORM 3 - CLOSURE REPORTCLOSURE REPORT - PROJECT '72

Name _____

Date _____

Written by _____

Position _____

1. SIGNIFICANT EVENTS:

Referral source : _____

Screening date: _____

Guest weekend: _____

Probationary week: _____

Phase changes: _____

Other: _____

2. OBSERVATIONS:

General Attitude to program: _____

Peer group relations: _____

Noticeable behavioral changes: _____

3. RECOMMENDATIONS OR SUGGESTED FOLLOW-UP

FORM 5 - CAPABLE NOTESCAPABLE NOTES

Leader: _____ DATE: _____

Participants: _____

Upcoming Tours: GROCERY LAUNDRY ENTERTAINMENT ACTIVITIES/SEMINAR

Leader _____

Notes from Board: _____

Tour Reports & Comments

Grocery _____
 Laundry _____
 Entertainment _____
 Activities/Seminar _____

Operations Report and Comments: _____

Coverage Report & Comments: _____

Group Material: _____

General Discussion _____

Highlights to Board: _____

FORM 6 - TOUR REPORT

TOUR REPORT

LAUNDRY

GROCERY

(CIRCLE ONE)

TO BE SUBMITTED TO TUESDAY MEETING BY 7:00 (PASS OR FAIL)

LEADER _____ DATE _____

PARTICIPANTS:

- | | |
|-----|-----|
| 1. | 11. |
| 2. | 12. |
| 3. | 13. |
| 4. | 14. |
| 5. | 15. |
| 6. | 16. |
| 7. | 17. |
| 8. | 18. |
| 9. | 19. |
| 10. | 20. |

TRANSPORTATION AND DISCUSSION OF IT:

REPORT AND DISCUSSION OF IT:

FORM 7 - SEMINAR REPORTSEMINAR REPORT

TO BE SUBMITTED TO BOARD BY 7:00 P.M.

LEADER _____

<u>PARTICIPANTS:</u> 1.	11.
2.	12.
3.	13.
4.	14.
5.	15.
6.	16.
7.	17.
8.	18.
9.	19.
10.	20.

REPORT: (INCLUDE ALL OBSERVATIONS, MAJOR & MINOR, GROUP & INDIVIDUAL INCIDENTS, i.e. BE COMPLETE!)

EVALUATION AND SUGGESTIONS FOR IMPROVEMENT:

CONTINUE ON BACK IF YOU SHOULD HAVE MORE TO SAY.

BOARD: EVALUATION APPROVED _____ DISAPPROVED _____

COMMENTS:

FORM 8 - COVERAGE REPORT

COVERAGE REPORT

Name _____

Week of _____

DAILY REPORT OF SIGNIFICANT EVENTS:

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Points for Group Discussion

Group Material (People)

Passed _____

Re-Do _____

FORM 9 - SELF-EVALUATION

SELF EVALUATION

NAME _____

NUMBER _____

Date Presented _____

Your evaluation is in two parts. In the first part, under each topic comment on what you have accomplished since your last evaluation (past), and then on what you intend to accomplish during the next period (future). In the second part of the evaluation, simply rate yourself on a 1-5 scale, rating your progress since your last evaluation. The scale at the bottom of the page indicates what each number on the scale means.

Rating

- A. School or work performance - comment on attendance and performance.
- B. General attitude (your commitment to Project '72)
- C. Participation (your involvement in program activities--groups, tours, seminars, etc. and activities outside of the Project)
- D. Leadership (your example of responsibility)
- E. Awareness of Self (your feelings about yourself and how you think others see you)
- F. Awareness of Others (your sensitivity to the feelings and needs of others)
- G. Your ability to give and accept criticism.
- H. Your ability to give and accept compliments.
- I. Improvement (what do you see as the greatest change in yourself since your last evaluation)
- J. Specific Goals - (areas of change you want to begin working on)
- K. Personal Relations - (for resident's evaluations only)

- Scale
- 1. worse than before
 - 2. same as before
 - 3. minimal improvement
 - 4. noticeable improvement
 - 5. striking improvement

Accepted _____

Re-Do _____

Phase change from _____ to _____

Revised March 4, 1975

FORM 11 - WEEKLY RATING SHEET - MASTER

WEEKLY RATING SHEET - MASTER

NAME _____

	RATERS	GROUP	PERSONAL RELATIONS	RATERS	SCHOOL WORK	HOUSE JOB	BEDROOM	TOURS
DATE _____	SELF-RATING			SELF-RATING				
				STAFF				
PHASE _____				OPERATIONS				
				LEADER				
IN PHASE				LEADER				
				LEADER				
WKS. _____				CONSENSUS				
				OBSERVATIONS				
	STAFF							
	CONSENSUS							

FORM 12 - BOARD MEETINGBOARD MEETINGDUTY _____ ASSISTANT _____ DATE _____ONOFFTOURSGROCERYLAUNDRYENTERTAINMENTLEADER: _____DRIVER: _____

WEEKEND BOARD REQUESTS - APPROVED: _____

WEEKEND PROGRAM: _____

NOTES TO CAPABLES: _____

ANNOUNCEMENTS _____

FORM 13 - BOARD REQUESTBOARD REQUEST

NAME _____ DATE OF REQUEST _____

(Be specific in giving details of date, time, place and reason)

REQUEST: _____

GRANTED

NOT GRANTED

Signature

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FORM 14 - REQUEST FOR PHASE CHANGEREQUEST FOR PHASE CHANGE FROM:☐ to ☐

NAME: _____ DATE: _____

WHY ARE YOU READY? _____

DATE OF SELF-EVALUATION: _____

GRANTED ☐NOT GRANTED ☐

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APPENDIX 3PROJECT 72 RESIDENT ORIENTATION BRIEF"A New Program for a New Way of Life"

We welcome you to Project 72; we are pleased that you have made the decision to join us. The purpose of our program is as follows:

This house is dedicated to the purpose of giving each member a new concept of life, and we believe that this goal can be achieved if each new resident dedicates himself to the following commitment: Each member is committed to help himself become a whole person and a responsible citizen in a free and law abiding society. Secondly, he shall be responsible for utilizing his individual capacities to help others achieve this goal.

You will notice from the Operation Board that Project 72 is a non-profit organization under a voluntary Board of Directors. We suggest that you study the Operational Board carefully and become familiar with the names of the Executive Board members, as well as the other people associated with Project 72.

The staff of the Project consists of the Director, who is responsible for the overall planning and financing, the House Manager who is responsible for the implementation of the program in the house, and the Assistant House Manager who is responsible for the physical aspect of the house and equipment. The staff, together with the Seminar Co-Ordinator, and the third and fourth Phase Representatives forms the Operations Board which is the governing body of your House.

Operations is a resident who helps the Assistant House Manager in the physical aspects of the house.

If you are joining the program as a resident you will be assigned a

room and it is your responsibility to keep this room clean and orderly. We suggest that you check with Operations regarding any cleaning materials and linens you may need, and regarding any questions you may have.

You will be assigned a job by Operations and your name and job title will be posted on the Operational Board. The manner in which you perform your assigned task will indicate your ability to handle responsibility, your attitude toward work and your involvement in the program. You are expected to advance to new and more responsible positions according to your progress in the program. Please make known to Operations or his assistant what job preferences you may have.

Upon admission into the house you are automatically in Phase I. You are expected to participate in the full program as outlined on the attached sheet. You will move from phase to phase at your own speed as you show ability to handle responsibility. Consult the sheets on phases to see what the responsibilities and privileges of each phase are.

You are expected to be at school or work during daytime hours, and we expect you to comply with the outlined program during evening hours and on weekends. We ask you to be prompt for all meetings and to participate in all aspects of the program to your fullest capacity.

In order to help you become responsible for all aspects of your own life, you will pay your own rent, buy and cook your own food, and do your own laundry as well as help with the house laundry. Grovery shopping tours and laundry tours are held on Friday evenings after rent meeting and are supervised by an experienced resident. Rent is \$10.00 a week and you are expected to spend between \$9.00 and \$11.00

on groceries each week, as well as to contribute \$4.00 a week to the House Fund. The \$9.00 - \$11.00 amount does not include cigarettes, cosmetics, shaving equipment and other personal expenses. If you need assistance in preparing your grocery list, please feel free to ask any of the residents for help. You are responsible for the cost of your own laundromat expenses.

In order to integrate more rapidly into the program we also request that you make no contact with your family, relatives, or friends during Phase I. Your family may call the office - 426-5519 - at any time to get a report on your progress and they are invited to attend group on any Thursday evening or visit on Sundays, if you so desire. If something comes up wherein contact with your family or friends seems desirable, please consult with the House Manager.

Leisure time is carefully planned so as to introduce a variety of new and challenging experiences, as well as to foster a sense of family unity. Your participation in family nights, activities, sports, and weekend entertainments is an indication of the degree of your commitment.

We hope you will consider this your home and us as a family wherein you are sincerely welcome.

Our rules are simple but adhered to strictly:

1. No private use of alcohol or unprescribed drugs shall be allowed on the premises.
2. Staff members reserve the right to inspect anyone's living quarters at any time.
3. No "Boy-Girl" relationships between resident members are permitted.
4. Male and female sleeping quarters are separated and are out of bounds for members of the opposite sex.

5. No physical violence will be tolerated.

6. Resident members may not borrow money from one another.

Regarding Rule No. 6, we feel that financial independence is a very important part of your adjustment to our program, and while we realize financial emergencies do arise occasionally for all of us, we request that when such a circumstance arises you discuss the situation with the House Manager should you need a loan.

Rents are due and payable at the time of admission and each Friday thereafter. It is your responsibility to pay your rent to the Duty Person each Friday and please be sure to ask for and hold onto your rent receipt.

Our kitchen facilities are completely equipped and you are encouraged to use these. Eating meals at home will give you an opportunity to learn how to shop for and prepare food, budget money, and feel more a part of our home. Other members will be pleased to help with any difficulties, you may have regarding the preparing of food. You are required to wash all dishes, pots and pans you may use, and leave all kitchen facilities clean and in order when you have finished. Please check with the Kitchen Inspector so you will know what food is community property and available for use by all members.

We again wish to emphasize that our primary concern is for people so please feel free to talk to any member, day or night, if you have a problem or problems which are disturbing you. We want you to develop the feeling that Project 72 is your home, so do not hesitate to ask questions regarding its operation.

You are eligible to make application for Phase II of our program after

you have been with us approximately 3-5 weeks. If you feel ready to enter Phase II of our program please submit a Board Request for Phase Change to any member of the Operations Board before 7:00 p.m.

Thursday. The Board is responsible for giving permission to you to write a self-evaluation which you will present to the residents and thereupon be accepted or not for Phase II.

There are three requirements to be completed during Phase II, to qualify for 1st weekend off:

1. Lead a grocery tour and submit a written report to the Capables' Meeting.
2. Lead a laundry tour and submit a written report to the Capables' Meeting.
3. Lead an entertainment tour and submit a written report to the Capables' Meeting.

During Phase I you are expected to do regular self-evaluations as scheduled by Capables. When you feel ready for Phase III, a Board Request for a Phase Change is again required, as is a self-evaluation.

During Phase III you are again expected to do regular self-evaluations, and to participate more in the actual running of the house.

1. Help plan and lead a seminar in consultation with the seminar co-ordinator.
2. Attend Operations Board when invited.
3. Take duty for a weekend.
4. Assist Operations Director.

After satisfactory completion of these steps you are eligible for Phase IV which is an optional phase. If, at the end of Phase II you feel ready to live independently of the house and program, we encourage you to do so and to maintain ties with us by way of the

non-residency program. If, however, you feel the need to integrate more slowly and with added help, then apply for Phase IV which is set up precisely for that purpose.

If at any time you should decide to leave Project 72 please do not do so without a notice. If you feel as if you want to leave the Project we suggest you discuss these feelings in group and with individuals so that you may be sure of your decision before making a change.

Those on probation or parole who wish to leave the Project are required to contact your probation or parole officer and ask for a change of residence.

It is our sincere hope that you will find meaningful experiences here at Project 72 and that you will be able to help others of your as a part of your own development and progress.

Revised Sept. 9, 1974

APPENDIX 4

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GLOSSARY

APPENDIX 6

addiction - physiological changes associated with chemical tolerance and chemical withdrawal.

alienation - an attitude reflecting rejection of or isolation from social structures, institutions and roles.

attitude - affective, evaluative disposition or response toward an object.

commitment - a sense of duty to complete what was knowingly undertaken.

communication gap - a perceived lack of understanding between individuals due to word usage and meaning attribution.

crisis intervention - mediation by an outside party in the affairs of someone whose behavior is judged as detrimental either to himself or to others.

dependence (habit) - frequency of occurrence of drug use.

drug - any mood altering substance.

encounter group - a type of group emphasizing here and now experience of self-awareness and genuineness in responding to others.

existential - pertaining to life in a social milieu.

goal - generalized statement of intent.

group - gathering of persons in a therapeutic milieu for the purpose of promoting growth and development of individual human potential.

genesis - beginning, origin or evolution of something specific.

life-skills - basic, acquired elements of socialization necessary for productive and satisfying independent and interpersonal living.

life-style - composite of behavioral patterns based on experience and beliefs.

marathon group - a type of growth group emphasizing the identification and stripping away of defensive behavior.

motivation - interior drive to achieve

objective - specific statement of intended results.

personality - the individual composite of qualities distinctive of a particular person.

prevention - anticipatory strategies or interventions for the purpose of avoiding undesirable consequences.

process evaluation - attempt to identify lack of congruency between intent, procedures and perceived outcomes within a particular social structure.

program design - assumptions, techniques and procedures employed to achieve goals and objectives.

rehabilitation - a process promoting socially acceptable patterns of behavior.

resocialization - acquired ability to adapt to co-operative group living within the community.

responsibility - recognition and acceptance of consequences of behavior as well as of obligations to self and others.

sensitivity group - (See encounter group)

social breakdown - disruption in healthy interpersonal relations or incorporation of anti-social attitudes.

socialization - learned ability to respond appropriately in social situations.

structure - concrete and specific statement of expectations and procedures.

sub-culture - a system of roles, beliefs and norms peculiar to a particular group within a given society.

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